



香港醫學會
THE HONG KONG
MEDICAL ASSOCIATION

疫情煎熬

Haunted by
the Pandemic



年報 Annual Report
2020/2021



使命

OUR PURPOSE

香港醫學會成立於一九二零年，匯聚了在香港執業、服務市民的會員醫生，我會的宗旨為促進醫學界的福祉及提升市民的健康水平。香港醫學會現有 10,000 多名來自醫學界各方的成員，是醫學界同業的喉舌，同時為會員傳遞來自世界各地的訊息，包括醫學上的專業操守以及各項醫學課題的最新資訊。

香港醫學會會徽誌有箴言：「**維護民康**」，以此表彰照顧病人是醫生的天職，醫學會並以倡導此信念為傲。

The Hong Kong Medical Association, founded in 1920, brings together all medical practitioners practising in, and serving the people of, Hong Kong. Its objective is to promote the welfare of the medical profession and the health of the public. With the current membership of over 10,000 from all sectors of medical practice, it speaks collectively for its members and aims to keep its members abreast of medical ethics and issues around the world.

The Association takes pride in displaying in its emblem its motto in Chinese which translates into **“to safeguard the health of the people”** to pronounce sacred duty of a medical practitioner to look after his/her patients.

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蔡堅醫生
Dr. CHOI Kin

二零二零至二零二一年間香港發生的大事主要圍繞著三個主軸。

2019 冠狀病毒病自二零一九年十二月開始肆虐，直至現在仍威脅全球，香港的第四波疫情才剛消退。雖然本港的新冠疫苗是免費提供給市民，但接種速度慢，接種率亦很低，現時只有約 20% 市民已經打針。政府真的是江郎才盡，無法提高接種率。導致這個局面，全因年青一代對政府的不信任，而長者則懼怕打針後出現嚴重副作用，甚至猝死。在一個與食物及衛生局的會議上，香港醫學會被指未有盡力向市民推銷接種疫苗。我遂自告奮勇向市民大眾示範，一位患有各種慢性疾病的長者，其中包括冠心病、高血壓，及需每日打糖尿病針等，亦適合和安全地接種疫苗。局方似乎未有留意醫學會在疫情期間大量面向公眾的工作，我嘗試在附表中列舉陳述有關部分。

全國人民代表大會通過《完善香港特別行政區選舉制度》的決定，並全面落實「愛國者治港」的原則。《港區國安法》共 66 條，分為 6 章，於二零二零年六月三十日刊憲公布，同日晚上 11 時生效，即香港回歸二十三周年前的一小時。一位曾代表醫學界的前立法會議員被還押。我只可以祈求他早日獲釋。

過去數個月，我在每月的會訊中撰寫關於即將審議的《醫生註冊（修訂）條例草案》。雖然現時申請者必須為香港永久性居民，但在一眾行政會議成員和立法會議員的加持下，可能很快便會門戶大開，容許非香港居民申請。政府想要醫學會支持這一修訂，醫學會縱然面對艱困，聲音被壓，我們也作出反對。中文大學醫學院前院長痛斥拒絕接納海外醫生是自私自利的行為。或許他有些健忘，他本人有份參與培訓本地約 30% 的醫生，如業界的道德操守有問題，他自己亦難辭其咎。

The year 2020-2021 in Hong Kong revolves around 3 issues.



Since it started its rampage in December 2019, COVID-19 still roams world-wide and in Hong Kong the 4th wave has just settled. Vaccination uptake rate is slow and only 20% of the population has been vaccinated though vaccination is free of charge. Government has few tricks left in the bag to boost the uptake rate as there is a strong mistrust of the government amongst the younger population and for the elderly, the fear of severe side effects of vaccination, including sudden death, could not be waived. In one of the meetings with Food and Health Bureau, the Hong Kong Medical

Association was being accused of not doing enough to help boost the vaccination rate. I had to volunteer to demonstrate to the public that an elderly man with chronic illnesses including coronary heart disease and hypertension and on daily injection could safely receive the vaccine. The Bureau was not mindful of how much we did during the epidemic and I attach a list of what the Association have done in the Appendix.

The National People's Congress has adopted the decision on "Perfecting the Electoral System of the Hong Kong Special Administrative Region" so as to put into practice the idea of "Hong Kong governed by patriots". Hong Kong National Security Law with 66 articles also came into effect at 2300 hours on 30 June 2020, one hour before the 23rd anniversary of the city's hand-over to the motherland from British rule. One of our colleagues who represented us before in the Legislative Council has been incarcerated. I can only pray for his early release.



那位行政會議成員多次發表言論，嘗試將醫生標籤為利欲薰心的「月球人」，甚至「星球人」，以期引起市民的仇富情緒。我曾公開要求他聯同稅務局公布有多少醫生的入息達這個水平。他卻往往避談那些真正肚滿腸肥的巨賈。全球的醫生，只要畢業於世界衛生組織認可的醫學院，便可來港報考執業資格試。今年有來自西班牙、意大利、德國、尼泊爾和馬來西亞的醫生參加第一部分的選擇題考試，全部及格。有九位來自英國的醫學院，其中八位及格。整體及格率達四成，就執業資格試來說，是一個合理的數字。如果醫院管理局能夠吸納這批考生，在幾個月之內便可將有限度註冊的人手倍增。誠如梁智鴻醫生所說，醫院管理局應研究如何停止局內人才流失，即「先止血」，而不是一味「輸血」，聘用未經考試評核的醫生。那位尊貴的行政會議成員在電台訪問中表示他的女兒及女婿在美國克里夫蘭醫學中心當眼科醫生，但克里夫蘭並非在新加坡 100 間醫學院的名單之內。這是否顯而易見的利益衝突？特別委員會知道這個消息後，又會如何反應呢？

Over the last few months, I have written in our Newsletter about the new MRO amendment which will take place soon. Although limited to Hong Kong residents, with the input from honorable executive councilors and legislative councilors, the door may soon be open to non-Hong Kong residents also. The Association has voiced our futile disagreement despite government's wish to incorporate our support. Former Dean of CUHK Medical School has called the profession selfish, forgetting that maybe some 30% of local doctors are trained under him and so he did not do a good job in teaching medical ethics. The executive councilor tried to label doctors as filthy rich professionals making a million dollar a day or a week to spur citizens' hatred for the rich. I have asked him to get hold of IRD to find out how many such doctors are there. He always forget to mention the real fat tycoons. Doctors all over the world from medical schools listed in World Health Organization can come and sit for our licensing examination. This year, we have doctors from Spain, Italy, Germany, Nepal and Malaysia who took the Part 1 MCQ and they all passed. 8 out of 9 from United Kingdom medical schools passed. Overall pass rate is 40%, a reasonable figure for licensing examination. If Hospital Authority can retain all of them, it could double its limited registration manpower within a few months. As Dr. CH Leong said, HA should investigate and stop manpower drain from itself, i.e. stop the bleeding, instead of transfusion by employing doctors who have not stood the test of the examination. Our honorable councilor went on air to say that his daughter and son-in-law worked in Cleveland Clinic as Eye doctors and Cleveland is not on the 100 medical school listing in Singapore. Is this blatant display of conflict of interest? What would the special selection committee do after hearing this piece of information?



附件 Appendix

香港醫學會發表對疫苗的意見 (2020 年 12 月至 2021 年 5 月)

HKMA Spoke on Vaccination (Dec 2020 to May 2021)

一、記者招待會 / 業界通訊

2021-05-12	香港醫學會會長蔡堅醫生響應接種疫苗
2021-05-07	香港醫學會對阻截新冠肺炎變種病毒的意見
2021 年 4 月至 8 月	香港醫學會與復星合辦 CME 課堂講解新冠疫苗
2021 年 4 月	香港醫學會會訊
2021-02-10	「香港醫學會有關新冠疫苗的建議」記者會

二、媒體報導

2021-05-30	文匯報 - 拒打針難阻第五波 棄疫苗蝕八億公帑
2021-05-27	商報 - 群體免疫關鍵 反彈風險猶存 林鄭：接種別再猶豫
2021-05-26	商業電台 - 蔡堅：市民對政府不信任令「谷針」有困難
2021-05-26	星島日報 - 促加快審批下調接種年齡 曾祈殷：未來每年好大機會要再接種疫苗
2021-05-14	文匯報 - 學童接連確診 專家籲家長教職員速接種
2021-05-14	香港仔 - 倡派演唱會飛 引年輕人接種
2021-05-13	商業電台 - 蔡堅：政府可提供演唱會門票 增加年輕人接種誘因
2021-05-10	頭條日報 - 蔡堅強調做好邊境管制 變異病毒如頸上一把刀
2021-05-05	經濟日報 - 醫生建議容許市民家居隔離或政府派員上門檢測
2021-04-29	RTHK - 蔡堅指衛生防護中心沒提供醫生紙格式 為業界製造困難
2021-04-19	頭條日報 - 曾祈殷指傳播快應加強追蹤 呼籲盡早打疫苗
2021-04-18	星島日報 - 港兩款疫苗可防「變」當局籲市民趁快接種
2021-04-17	頭條日報 - 曾祈殷倡如接連現外國輸入確診應禁飛 憂屯門傳播未止
2021-04-17	HK01 - 一文看清 南非變種比英國更強 疫苗保護力會否大減？
2021-04-15	TVB - 兩名曾接種復必泰疫苗孕婦流產 專家委員會將作評估
2021-04-12	HK01 - 再陷疫苗戰場 港版「疫苗護照」如何落地？
2021-04-06	大公報 - 曾祈殷：疫苗接種可推展至年輕人 提高接種率
2021-03-30	文匯報 - 曾祈殷倡港府增加疫苗接種誘因
2021-03-29	橙新聞 - 須防復活節後疫情反彈 曾祈殷：現不宜放寬社交距離措施
2021-03-27	NOW - 曾祈殷：復必泰疫苗最長可相隔 42 日接種第二針
2021-03-18	明報 - 曾祈殷倡引入更多疫苗供選擇 可考慮准接種者院舍醫院探訪
2021-03-17	東方日報 - 接種指引空泛捱轟 醫學會促增嚴重副作用數據
2021-03-16	HK01 - 醫學會批衛生署指引空泛 應提更多數據證事故與新冠疫苗無關
2021-03-11	東方日報 - 私醫憂出事 促政府訂立清晰接種準則
2021-03-10	商台 - 蔡堅冀當局就新冠疫苗制訂適合接種臨床指引
2021-03-03	蘋果日報 - 港疑首宗打中國科興後死亡 63 歲嚴重糖尿男針後 2 日休克不治
2021-02-26	蘋果日報 - 明起 5 中心僅打科興未等埋 BioNTech 專家批令市民冇得揀
2021-02-25	AM730 - 專家拆解疫苗開發 第三期研究最關鍵
2021-02-20	經濟日報 - 科興疫苗今日抵港 蔡堅相信副作用較小惟效果亦相對較低
2021-02-17	大公報 - 曾祈殷：若未來 7 日確診急升 政府或須收謹防疫措施
2021-02-07	TVB - 新冠疫苗最快月底抵港 政府擬為優先為十間安老院舍長者接種
2021-01-29	明報 - 本港累計 20 宗新冠變異病毒株輸入個案 N501Y 傳播力高五至七成 BioNTech：能中和 20 變種病毒 國產滅活疫苗 2 個月可「升級」
2021-01-18	東方日報 - 研究：維他命 D 可防新冠 醫學會促港府派予銀髮族
2021-01-14	香港商報 - 港府有信心確保疫苗品質 最快春節後展開接種計劃

2021-01-09	蘋果日報 - 百萬劑 BioNtech 下月抵港
2021-01-08	晴報 - 18 區設接種中心 疫苗擬下月開打 料千名私醫可參與計劃
2020-12-23	蘋果日報 - 專家指仍可產生相當抗體
2020-12-15	東方日報 - 疫苗數據未齊備 港府搵市民較飛
2020-12-12	明報 - 醫護對內地疫苗缺信心 蔡堅籲官員帶頭打
2020-12-12	經濟日報 - 家庭醫生：看外國情況再決定

三、報章專欄

2021-05-30	明報 - 疫苗失效 (醫學會副會長鄭志文)
2021-05-28	蘋果日報 - 家庭醫生寫週記：疫苗事故數據 (醫學會副會長鄭志文)
2021-05-10	明報 - 新冠疫苗皮膚反應 (醫學會副會長鄭志文)
2021-05-10	明報 - 年輕新冠肺炎住院 個案上升 (醫學會副會長鄭志文)
2021-05-09	明報 - 新冠肺炎口服疫苗與口服藥 (醫學會副會長鄭志文)
2021-05-07	蘋果日報 - 家庭醫生寫週記：打針後記 (醫學會副會長鄭志文)
2021-05-05	東周報 - 社區傳播變種新冠病毒 (醫學會副會長鄭志文)
2021-05-02	明報 - 打針與戴口罩 (醫學會副會長鄭志文)
2021-03-29	明報 - 疫苗防不了變種病毒？ (醫學會副會長鄭志文)
2021-03-26	蘋果日報 - 家庭醫生寫週記：效益大於風險？ (醫學會副會長鄭志文)
2021-03-19	蘋果日報 - 家庭醫生寫週記：深奧的群體免疫力 (醫學會副會長鄭志文)
2021-03-15	明報 - 打左針都中招？ (醫學會副會長鄭志文)

四、電視 / 電台訪問 (1) 醫學會會長蔡堅 (2) 醫學會傳染病顧問委員會聯席主席曾祈殷

2021-05-26	RTHK 31【千禧年代】- 新增 2 宗源頭不明個案 為菲傭及巴基斯坦籍地盤工人 (2)
2021-05-24	Now 新聞【時事全方位】如何盡快恢復與粵澳正常通關？ (一) (2)
2021-05-09	RTHK【給香港的信】- 蔡堅：若做不好邊境管制等 變異病毒如架在頸上一把刀 (1)
2021-05-09	Now 新聞【經緯線】- 醫者新途 (一) (1)
2021-04-29	RTHK 31【千禧年代】- 處所員工因健康理由不能接種疫苗須醫生證明 (1)
2021-04-26	RTHK 31【千禧年代】- 外傭檢疫期後確診 專家質疑華大基因採樣不當 (2)
2021-04-06	RTHK 31【千禧年代】- 本港新增 15 宗輸入及 1 宗本地源頭不明個案 (2)
2021-04-06	RTHK【視點 31】- 醫學會會長蔡堅受訪談疫苗
2021-03-30	RTHK 31【千禧年代】- 周四起部分社交距離措施放寬、政府 4 月底安排指定航班接載滯英港人返港 (2)
2021-03-27	NOW【大鳴大放】接種疫苗 (一) (2)
2021-03-18	RTHK 31【千禧年代】- 男督察接種科興疫苗數天後確診 (2)
2021-03-16	RTHK 31【千禧年代】- 衛生署發新冠疫苗接種指引 (1)
2021-03-04	NOW【時事全方位】如何評估個人接種新冠疫苗風險？ (一) (2)
2021-02-12	D100【風波裏的茶杯】電話訪問 (2)
2020-12-27	NOW【大鳴大放】新冠疫苗 (二) (2)
2020-12-18	D100【風波裏的茶杯】電話訪問 (2)
2020-12-14	Metro Radio 曾祈殷指新冠病毒未見變種跡象
2020-12-14	港台【千禧年代】新增 95 宗新型肺炎確診 41 宗源頭不明 (2)
2020-10-27	RTHK【Backchat】Covid-19 and winter flu season (Dr Gabriel Choi, President of the Hong Kong Medical Association)
2020-08-25	TVB【清心直說】全民檢測能否遏止新冠肺炎的爆發？ (1)

五、其他採訪 (1) 醫學會會長蔡堅 (2) 醫學會傳染病顧問委員會聯席主席曾祈殷

Ongoing	TVB【東張西望】回應新冠肺炎疫情 (2)
2021 年 3 月	TVB【咁大件事點解冇人講】 (2)



馮德焜醫生
Dr. FUNG Tak Kwan, James

二零二一年是香港醫學會立足香港的第一百零一個年頭。在這個新紀元的第一年，新型冠狀病毒病（COVID-19）仍然肆虐全球，並嚴重威脅香港市民的健康。同時，這亦是港區國安法元年。隨著全國人大於二零二一年三月通過改變香港選舉制度的決議，包括醫學界在內的各專業界別在政治上被重新「執位」。再者，二零二一年醫生註冊（修訂）條例草案火速上馬；執筆之時，其通過可謂毫無懸念。在此內外交逼之際，香港醫生一如以往，在疫情中堅守崗位，全力以赴，只求維護民康，緩減疫情；盡力讓香港維持正常運作。

2019 新冠肺炎大流行的相關工作

醫學會在二零二零年七月，八月及九月向會員分派口罩，以助私家醫生在前線抗疫。同時，為支持政府於二零二零年九月推出的大規模社區檢測，香港醫學會和食衛局曾多次會晤，提供意見。亦三次向會員發出簡訊，交待檢測的細節，並協助招募醫生參與。

因應 COVID-19 全球大流行，MPS 在二零二零年四月同意對私營執業的醫生提供相當於 2 個月會費的回贈。該款項已於同年八月陸續分發。關於發放回贈時出現的混亂，醫學會亦聯絡了 MPS 英國總部一方澄清細節，並向 MPS 反映意見。



The Hong Kong Medical Association turns 101 years old in 2021. In this 1st year of the new century, COVID-19 is still haunting the world and causing great threat to the health of the Hong Kong people. This year also marks the implementation of the National Security Law. Ever since the National People's Congress (NPC) passed the Decision on Improving the Electoral System of the HKSAR in March 2021, there has been a political reshuffle of all professional sectors, and the medical profession is of course one of them. Additionally, the Medical Registration (Amendment) Bill was put up to the Legislative Council in such a hasty pace, I do not have doubt in one second that it will be not passed. Despite being caught between internal and external forces, we Hong Kong doctors have been upholding our belief and doing our best to safeguard people's health in the fight against COVID-19. We spare no effort in maintaining the normal functioning of the city.

Our work on combating the COVID-19 pandemic

The Association distributed surgical masks to members in July to September 2020 to help colleagues in the private sector to tide over the shortage, so that they could continue to see patients. Furthermore, we had several discussions with the Food and Health Bureau (FHB) and advised them prior to the launching of the universal community testing programme in September 2020. We have sent details of the programme to members through e-mail thrice and helped to recruit healthcare professionals to work in the swabbing centres.

Acknowledging the impact of COVID-19 on the income of doctors in private practice, the MPS agreed to offer eligible members the equivalent of two months' free membership in April 2020. The fund was disbursed from August 2020 onwards. The HKMA represented our members in clarifying the details with the MPS UK head office when hiccups came up during the refund process.

As waves of the epidemic emerge, the Hong Kong Government adjusted its control measures from voluntary mass testing to compulsory testing for patients or groups suspected to have contracted COVID-19. Starting from November 2020, private medical practitioners could require suspected patients to undergo deep throat saliva test based on their own clinical judgements. The HKMA actively communicated with the FHB before and after the implementation of the compulsory testing, seeking to solve the problems arising from the distribution of specimen bottles and tracking of patients. The Association assisted the Government in promoting COVID-19 vaccination when the vaccines became available in Hong Kong, and we also helped to pass on the information to private doctors who participated in the vaccination programme. To further encourage

隨著疫情的起伏，政府的防疫策略亦由大規模檢測，逐漸轉變為強制指定病人或群組檢測。自二零二零年十一月開始，私家醫生可根據臨牀判斷強制病人進行深喉唾液測試。在強制測試正式推行前後，醫學會曾多次向食衛局反映意見，以求解決樣本瓶分發及追蹤病人等細節問題。及後新冠病毒疫苗到港，醫學會除配合政府的疫苗計劃作出宣傳外，亦協助向參與的私家醫生發放資訊。為進一步鼓勵市民參與接種，會長蔡堅醫生亦已於二零二一年五月公開接受復必泰疫苗注射。

在疫情期間，每天都有大量和抗疫相關的健康和疫情最新進展的資訊在社會傳播。為向市民大眾提供準確訊息，醫學會傳染病顧問委員會在過去一年以近乎每周數次的密度，屢次接受傳媒訪問，並公開解答市民大眾的問題。

國安法、人大決定及醫學界

繼港區國安法於二零二零年七月一日生效，香港正式進入一個全新的政治環境。縱使醫生本業不涉政治，大環境的轉變，令香港的醫生難以置身事外。其中最顯而易見的，當然是前醫學界立法會議員郭家麒醫生因立法會初選案一事被捕，並因港區國安法而被拒絕保釋，執筆之時還在押候審。

個別醫生的政治立場及行為，當然不能代表醫學界整體。但郭醫生的遭遇，在原本崇尚多元互動和公開辯論的香港政治氛圍中，不外是一記重量級冷凍治療；皮膚病治好了，但連附近正常皮肉也摧毀了。一時之間，包括醫學界在內的整個社會噤若寒蟬。不同的意見消失了，但各種問題依然潛伏。應付 COVID-19 大流行，各項公共衛生及防疫有關的工作，尤其如何處理當中實際執行上的難題，本就極需要社會各界及醫生共謀對策。在原本的社會環境下，不同的建議和觀點，都會得到公開的報導和評論；獲公眾認同的，最終自然會被政府吸納。這實際上亦有助政府施政暢順。寒蟬效應之下，醫生以至公眾對政府各項防疫措施，例如怎樣推行強檢而不損醫患互信、應否對特定群組實施入境豁免檢疫，對何等人仕豁免檢疫、如何決定社交距離及聚集限制的收放和鬆緊、如何判斷疫苗效力及選擇不同疫苗、應否對未受疫苗接種人仕作出差別對待等等，都無法（或稱不敢）開門見山的討論。歸根結底，是政治環境的突變，直接阻礙了抗疫和民生的交流。到最後事不服眾，香港政府推行各項防疫工作，自然變得事倍功半。

更進一步，全國人大於三月的全體會議中，通過了改變香港選舉制度的決定。從此，立法會中的分區直選議席由 35 席下降至 20 席，功能組別中原來醫學界的議席則和衛生服務界合併為 1 席，另加 40 席選舉委員會推選的議席。而選舉委員會中醫學界亦和衛生服務界合併；委員的產生辦法，由

members of the public to take the jab, our President Dr. CHOI Kin received his first BioNTech vaccine in public in May 2021.

During the epidemic, there have been large amount of information related to epidemic control and the latest progress circulating in the society every day. In order to provide accurate information to the general public, the HKMA Advisory Committee on Communicable Diseases has been interviewed by the media several times a week over the past year to answer to the questions of the public in open.

National Security Law, Decision of the NPC and the Medical Profession

Following the implementation of the HKSAR National Security Law on 1 July 2020, Hong Kong faced an unprecedented political environment. Though we seldom touch on politics in medical practices, Hong Kong doctors cannot keep away from it when there is a fundamental change in the society at large. Dr. KWOK Ka Ki's case is an obvious example, our former Legislative Councillor (Medical) was arrested for involving in democratic primaries, and was denied bail under the National Security Law. At the time of writing, he is still remanded in custody.

Certainly, the political stand and behavior of individual doctor does not represent the whole medical profession. However, what happened on Dr. KK KWOK is like an excessive cryotherapy to the political ambience that primarily welcomes multiple interaction and open discussion: while the problem was cured, the normal skin and tissues surrounding the applied area got burnt altogether. The whole community including the medical profession were silenced in no time. Opinions not heard of, but the problems still persist. In the fight against COVID-19, the success relies on the participation and co-operation of all sectors as well as the medical professionals in varies public health and anti-epidemic efforts, especially on ways to handle problems arose during the course of execution. Before this noticeable change in the social, different opinions and suggestions are naturally covered by the mass media and scrutinized by the public, those with strong public support will be taken up by the Government. The mechanism facilitated the smooth implementation of Government policies. Unfortunately, the chilling effect suppressed constructive discussions and comments from doctors and the general public on the Government anti-epidemic efforts, for instance, what is the win-win approach to carry out compulsory testing without harming the trust between doctors and patients, whether to exempt specified persons from compulsory quarantine and who they are, how to assess the efficacy of vaccines and to choose among different vaccines, and whether differential treatment should be applied on people not yet inoculated with COVID-19 vaccines. After all, it is the change of the political ambience that hindered the anti-epidemic efforts and social interaction. All these added to the discontent of the public, and hence the outcomes of the Government anti-epidemic measures are not quite satisfactory despite all the efforts.

On top of this, the NPC passed the Decision on Improving the Electoral System of the HKSAR in March 2021. Since then, seats for geographical constituency are decreased from 35 to 20, the two seats for the medical functional constituency and the health care functional constituency will now merged as one, and another 40 seats will be for the Election Committee constituency. For the Election Committee, the medical subsector will also be merged with the health services subsector, the original 30 seats directly elected by eligible registered

原本 30 席醫生直選，變成 15 席由有關醫療衛生的政府委員會及諮詢組織代表當然出任，15 席由特定組織以團體票選出。換而言之，即取消直選方法。連番的改動，實質改變了原來已不甚完美的，但勉強仍可視為由下而上，由眾及寡，聚集眾議的選任制度。新的政治制度由特定精英和政治組織所壟斷，效果則為強化壟斷一方的政治意志。若意見和政府或政權相同，這當然有助提高行政效率。但如上文所述，單就新冠肺炎大流行的抗疫工作，在醫學界以至社會當中，不同的建議和批評比比皆是。醫學甚至社會的進步，正發源自各種思潮，理論和意見的碰撞，淬煉及沉澱；此凡種種，實在是正常健康的社會必有而必需之現象。正如健康的腸道需要益生菌調節；不當使用抗生素醫治病毒性腸胃炎，以圖為腸道「殺菌」，後果是惡菌未滅，益菌卻先行絕跡；更可能讓惡菌生長不受制，倒過來引發偽膜性結腸炎。病人沒有治好，病卻反而更重了。



2021 年醫生註冊（修訂）條例草案

特首於二零二一年施政報告中明言，將在本屆立法會完結前完成醫生註冊條例的修訂，為海外醫生提供免試註冊的新途徑。按照最新的建議，政府將在醫委會中成立一個「特別註冊委員會」，為求制訂一個認可醫學院的名單。在該名單上畢業的香港永久性居民，可透過全職受聘於兩間大學，醫管局或衛生署而獲得特別註冊的身份。特別註冊的醫生若獲得專科資格，並在公營醫療系統服務 5 年以上，便可進一步獲得正式註冊的資格。

免試註冊的提議並非新鮮事。事實上，為解決公立醫院醫生短缺的問題，政府在過去 5 年曾先後 2 次提出醫生註冊條例的修訂，亦曾在醫委會推動改革，讓公院服務 3 年以上，並通過執業試的海外畢業醫生轄免實習。一直以來，香港醫學界的共識，是採用個別考生的資格考核，捨棄海外院校的資歷認可。直白一點來說，在香港複雜多變的政治環境之下，我們相信以考試而非背景來考核醫生，是最公平和對市民保障最佳的方法。考試論斷的是個人的能力；海外院校資歷認可，很容易便會淪為不同院校甚至不同國家之間選擇的爭論。這就有如在大學聯合招生的文憑試標準之上，另加一項「名校生保送」制度。結果當然是人人爭入名校，各中學爭取入列成為名校；但對如何保持入讀生甚至畢業生質素，卻是乏善足陳。

doctors will now be changed to 15 seats from specified offices of the medical and health services subsector including relevant Government committees and consultation organizations, and another 15 seats from specified entities by means of corporate voting. In other words, no more direct election. These changes have actually altered the already not so perfect, but still bottom-up, and participatory election system. The new political framework is monopolized by designated elites and political entities, so as to strengthen their political influence. It is understandable that administrative efficiency will improve when the public opinions favour the Government or the regime. But as I have just said, there exists various suggestions and criticisms in the medical profession and the community solely on the issues related to the containment of COVID-19. The advancement of medicine and even society is originating from the collision, refinement and precipitation of various thoughts, theories and opinions, all these are indeed essential and necessary phenomena for a normal and healthy society. As illustration, we need probiotics to regulate and keep our intestine healthy, improper use of antibiotics to “eradicate” germs that cause viral gastroenteritis will eliminate all the benefitting bacteria before the real culprit.

Worse come to worse, the growth of the disease-causing germs become uncontrolled, and further causes pseudomembranous colitis. At the end of the day, the patient is not cured, and the disease even get worse.

Medical Registration (Amendment) Bill 2021

The Chief Executive of HKSAR announced in the Policy Address 2021 that the Administration would push through the Medical Registration (Amendment) Bill by end of the current LegCo term to create a new pathway for non-locally trained doctors to obtain full registration in Hong Kong without taking the Licensing Examination. According to the new proposal, the Government will establish under the Medical Council a statutory Special Registration Committee for determining a list of recognised medical qualifications awarded by non-local medical schools. A Hong Kong permanent resident possessing a recognised medical qualification on the list will be eligible for special registration in Hong Kong, provided that he/she has a full-time job offer as a medical practitioner from the Hospital Authority, the Department of Health and the medical schools of the University of Hong Kong and the Chinese University of Hong Kong. Those medical practitioners with special registration engaged in full-time employment in the public healthcare institutions for at least five years after obtained a specialist qualification recognised by the Hong Kong Academy of Medicine would be eligible for full registration.

It is not the first time for the call for doctor registration without licensing examination. As a matter of fact, in order to address the shortage of public doctors, the Government has amended the Medical Registration Ordinance twice in the past 5 years. Changes were also imposed in the Medical Council to allow doctors with 3-year experience in Hospital Authority to exempt from internship if they passed licensing examination. The medical sector of Hong Kong has long accepted to consider candidate's individual credentials instead of focusing overseas medical school accreditation. Straight to the

相同的觀點，由二零一五年政府首次提出 MRO 修訂之始，醫學會已一直反覆向政府反映。同樣，因應公立醫院醫生短缺，對過往政府及醫委會提出的有限度註冊制度改革，醫學會亦一直在原則上予以支持。但政府在本年仍一意孤行，在醫學界全力應付 COVID-19 大流行之際，倉卒推動新一輪的醫生註冊制度改革，一味硬推免試註冊。

如此重大的變動，政府卻連一個似樣的公開諮詢也懶於開展；明明醫學界中反對聲不絕於耳，卻充耳不聞。政府口說尊重醫學界的專業自主，實際上連特別註冊委員會的組成和選任，也不由醫委會自行決定，全憑特首及官員的全權委任。醫學會在此形勢下，仍盡力向政府及公眾陳述。在二月及四月兩次記者招待會中，均把握機會向公眾力陳免試註冊之弊。唯一如上文所述，香港政治環境已歷丕變，如二零一六年一般的醫學界大規模反對運動，在今時今地已難以復加。二零二一年醫生註冊（修訂）條例草案，預料將在本年底前順利通過。



轉變中的社會，轉變中的醫學會

COVID-19 疫情反反覆覆，對香港社會的影響既深遠亦持續。在醫療行業方面，為滿足防疫需要，不論住院或是門診服務都多了新的限制。例如預約和非急症入院前必須有陰性測試的記錄，入院後家屬探訪亦有不同規矩等等，變相增加了醫患之間溝通的困難。這些新增的難題，部份可靠科技解決，但物理和距離上的阻隔，卻不能完全以電腦和視像解除。再加上社會氣氛正處低位，普遍瀰漫著互不信任的情緒。這些轉變，都加重了在公院或在私家前線醫生的工作負擔。醫生一方面要盡量維持正常的業務，處理除 COVID 以外的各種病人；一方面要保持高度警覺，及早和準確地作出診斷，以防病毒蔓延；更要時刻警惕，以免自己因工染病。箇中壓力之鉅，可想而知。

幸好一直以來，香港的市民大眾對醫生普遍存有信任，疫境中的這一年，未見有醫患之間加深矛盾。唯一對前線醫生的批評，是在二零二零年十月時由衛生防護中心發出；其指稱有私家醫生未能為病人收集作新冠病毒檢測，做法並不理想。醫學會其後作出查證，知道該醫生實在已向病人作出轉介，第一時間已發新聞稿澄清。對於個別不幸染疫的私家醫生，醫學會亦有發送慰問，並盡量協助醫生在隔離和治病期間安排替工或調整病人預約。

point, using examination results and not doctor's background is the best and fair way to assess their credential for safeguarding people's health, considering Hong Kong's everchanging political complexity. Examinations are tests to evaluate a person's skills and knowledge. Overly relying overseas qualification accreditation may result in unhealthy competition between schools even sovereignties. It is like creating a pathway for Band 1 school graduates to enter universities. At the end of the day everyone will fight the way to get into these Band

1 schools. It, however, is no guarantee of the quality of the students and even the graduates.

The HKMA has been repeatedly raising the above points since 2015 when the Government first raised MRO amendments. Our Association has supported in principle

the Government's proposal on limited registration in view of the shortage of public doctors. This year, at the time the medical sector is battling with the COVID-19, the Government has decided to rush through examination waiver. There is even no proper consultation for such an important policy which is going to impact Hong Kong for long long time. Voices of the medical sector are ignored. The Government says professional autonomy of the medical sector is respected, yet the composition and nomination of the proposed Special Registration Committee is not under the jurisdiction of the Medical Council. Against all odds, the HKMA held press conference in February and April and attempted to explain to the Government and the public what examination exemption would cost us. Anyhow, much of course has changed, it is less possible if not impossible to campaign now as in 2016. The 2021 MRO (Amendments) Bill should get passed end of this year in the absent of rational and sensible challenges.

The Changing Society and the HKMA

With COVID-19 still lingering in Hong Kong, no one here is unaffected under the pandemic. For the medical sector, new measures such as COVID tests before booking or admission and visit restrictions are introduced in hospitals as well as outpatients service to prevent outbreak. Unavoidably communication hurdles added stifling doctor-patient relation. Modern technology may be able to solve a part of the problem, but computers and monitors are no cure in bridging the physical gap. Our society is at its low, with mistrust and sense of alienation all around us. Frontline doctors in both public and private sectors are added with burden and stress accordingly. On one hand, the doctors have to maintain service for regular patients; on the other hand, they need to be watchful for COVID spreading. On personal level they are required to be extra vigilant to keep themselves healthy. One can imagine how stressful it must be.

Thanks to the enduring trust of the public for doctors, it appears that doctor-patient relationship remained intact even under the COVID-19. The only criticism, however, was issued by Centre of Health Protection in October 2020 that a private doctor did not perform COVID-19 tests for his patient. After investigation, the HKMA has issued a press statement to clarify that the doctor had made referral for testing. The

社交距離和聚會的種種限制，大大限制了醫學會舉辦的各種活動。最明顯的，莫過於醫學會百周年晚宴需延期舉行。其實，醫學會自去年起便取消了每月的嘉賓交流活動，並增添遙距視像會議進行每月會董會。各社區聯網舉行的 CME 活動，亦全面改為以 Zoom 網上進行。在二零二零年十一月，醫學會以網上形式舉辦男士健康周，進行了一連六日的講堂、研討會及公眾講座。醫學會轄下的攝影學會，更首次以網上展覽的形式推出其十周年攝影展。在惡劣的形勢下，用科技和機敏克服疫境，力求維持正常運作，全力守護市民健康，可謂這一年香港醫生和醫學會的寫照。

正常？無常？

結語之時，筆者想起最近巡房時的一件小事。

話說筆者最近和受訓醫生一同為某病人進行盲腸炎的微創切除手術。由於該患者入院前已有近兩天的不適，進行手術之時，腹腔內炎症頗為嚴重，盲腸已完全壞死了。在完成切除後我們需安放引流，以免發炎既濟未退，重新聚積的積水會再化膿，妨礙患處痊癒。

手術後的第二天，病人在巡房時很緊張的問我們，身上插著引流，患處仍有疼痛，這是否正常？

無論站在醫者或患者的角度來看，這都很難說是「正常」的狀態。我們當然馬上向他講解，謂發炎情況比原本估計嚴重，引流只是暫時和預防性的舉措，待炎症退卻時便會解下。

放下醫治中的醫理和人情，我忽然發現，日常口語中所講的「正常」，其實一點也不正常；這反倒是說明我們多麼的討厭「無常」。我們每一個人的心底深處，其實都害怕生活的改變，不希望常常要適應新環境。病人在接受治療後，所期待的「正常」，其實是染病前的狀態。醫生呀，我入院時可沒有引流插在身上，這個怪怪的，好「不正常」。

幸好，對大部份病人來說，盲腸炎手術沒有太多的後遺症。就算計及這種已生併發症（盲腸壞死）的病例，手術完成後，長期問題還不算多。病人要適應的，可能只是數天的引流，約一周的住院，和一周的抗生素治療。可是，面對更繁複的手術，病人要適應的，可能是身上多了難看的疤痕，部份或全部的乳房切除（對男士來說，適用的例子譬如陰莖切除），甚或是長期造口等等；真的是「好不正常」。

外科手術的最本質的特徵，就是以創傷帶來醫治；微創不微創，只是手法不同而已。這種醫治必會帶來創傷，唯權衡利弊，手術復元後，可為病人帶來更大的得益。故此，向病人建議這種「不正常」的

HKMA has also sent comforting words to doctor members suffering COVID and assisted in patients booking and locum arrangement during doctors' quarantine.

Social distancing and gathering restrictions caused disruption in our regular meetings, events and activities. First, the HKMA 100th anniversary celebration dinner was postponed. Also, monthly council dinners were cancelled and council meetings held with remote technology. Continuing medical education sessions of the HKMA community networks were changed to be held via ZOOM. In November 2020, the HKMA launched Men's Health Week, a 6-day event including conference, symposium, workshops and public forum, via online streaming. The HKMAPS our photographic club ran its 10th anniversary exhibition on online platform as well. The above are just a few examples of how the HKMA applied tech and flexibility robustly to work through the pandemic times. These also serve to illustrate how doctors and the HKMA responded to the pandemic and safeguard people's health during the past year.

Normal? Impermanence?

I thought of an incident happened during my recent hospital round when I was writing these concluding words.

I recently performed a laparoscopic appendectomy for a patient with my trainee. Since the patient had been feeling sick for nearly two days before admission to the hospital, at the time of the operation, the inflammation in the abdominal cavity was quite serious. The appendix has already turned gangrene. After we have taken out the appendix, we needed to place a drain to prevent any infected collection. Any re-accumulation may turn into abscess, which in turn may prolong the infection and affect the healing of appendiceal stump.

On the second day after the operation, the patient asked us nervously during the hospital round if it was normal to have the drainage connected to his body. It was obviously painful to him.

Obviously, it can't be "normal" either from the perspective of the doctor or the patient. We hence explained to him immediately that the inflammation was more serious than expected, and the drainage was temporary and preventive. It would be removed when the inflammation subsides.

Putting aside the medical principles and personal touch in our daily practice, I suddenly realized what we always say as "normal" is actually not normal at all. On the contrary, this shows how much we hate "impermanence". Deep down our hearts, every one of us is actually afraid of facing changes in life, and unwilling to adapt to new environment again and again. Patients expect to resume "normal" after receiving treatment, which is the state before getting ill. My patient complained that it was "abnormal" as he didn't carry the drainage when admitted to the hospital.

Fortunately, appendectomy will not cause much sequelae to most patients. Even taking into account of complicated cases of appendicitis with this kind appendiceal gangrene, seldom would run into long-term problems after successful operation. Mostly, patients only have to adapt to a few days of drainage, a week of hospitalization or so, and a week of antibiotic treatment. However, in cases of more complicated operations, what patients have to adapt to may also include unsightly scars, partial or total mastectomy (for men, a relevant

醫治仍是合理的。無論手術孰大孰小，就算創傷的傷口癒合了，手術後病人就不會和以前一樣了。外科醫生永遠無法為病人帶來「正常」，因為真正的「正常」，是不應有創傷的。長久以來，外科醫生由訓練到規管都特別嚴格，正是因為他們實在「不正常」。

廣義來說，無論我們如何努力，都無力讓香港回復正常。因為疫情，因為政治環境的轉變，因為無論你喜歡不喜歡的種種無常，現在的香港，就如那位手術後的病人一般，期待著一天的正常。或許，對我們醫生來說，可以做的不是如何讓她回到二零一九年前的那個「正常」模樣，而是在二零二一年的今日，在崩壞當中守護好還值得守護的一切（特別是我們每位從事醫業的初心），讓身邊的人和病人感覺如常。



example is penectomy), or even a permanent stoma etc. Then it's "really abnormal".

One principal basic of surgery is to heal with trauma, minimally invasive or not is just a difference in the technique used. This kind of treatment will inevitably bring about trauma, but having weighed the pros and cons, it will bring more benefits to patients after recovery from the operation. Therefore, it is still reasonable to recommend this "abnormal" treatment to patients. Regardless of whether the scale of the operation is large or small, or even if the wound is healed, the patient will not be the same as before. Surgeons can never bring "normal" to the patient, for "normal" should not bear a trauma. As always, the training and regulation of surgeons have been particularly strict, this is because they are really "abnormal."

Broadly speaking, no matter how hard we try, we are unable to bring Hong Kong back to normal. Due to the epidemic, or the changes in the political ambience, or the impermanence that you can't choose, Hong

Kong present day is just like the patient who is looking forward to become normal after the operation. To us doctors, maybe what we can do is not to bring her back to the "normal" status before 2019, but to safeguard the things that are worthy of protection in this turmoil (especially our oath taken when we first took up the duty as doctor), now, in 2021, making people around us and patients feel like normal.

以下節錄一小段歌詞。在這個無常的一年，願醫學會和香港的醫生一切安好。

「So I say I love you，只有愛恒久不枯
生活在劫難裡，希望從未給玷污
天給我磨煉也好，我未敢辜負，誰要被懷疑低估
Here we say I love you，都變了甜品師傅，
巧妙地化掉這點苦
即使要蒙著我嘴，更大聲歡呼
全憑愛令人堅持，還有各位的照顧」

Here I quote a few verses of a song. May I wish the Hong Kong Medical Association and Hong Kong doctors all the best in this year of change.

"So I say I love you, only love lasts forever
Living in catastrophe, hope has never been tarnished
Even though I was tempered, I dare not let down,
no one should be questioned and underestimated
Here we say I love you, I have become a dessert master and
cleverly dispelling this bit of bitterness
Even if you want to shut my mouth, I will cheer even louder
It's love and the care of you that make me persist"

二零二零至二零二一年度會董會成員 The Council 2020-2021



後排（由左至右）：

陳子泰醫生，林賀醫生，陳厚毅醫生，紀紹綱醫生，余達明醫生，唐繼昇醫生，楊超發醫生，
陳以誠醫生，陳念德醫生，李福基醫生

前排（由左至右）：

葉永玉醫生，冼佩儀醫生，馮德焜醫生（義務秘書），何仲平醫生（前會長），蔡堅醫生（會長），林偉珊女士，
楊協和醫生（義務司庫），莊勁怡醫生

其他會董：

陳沛然醫生（立法會議員），鄭志文醫生（副會長），麥肇敬醫生（副會長），陳小劍醫生，覃天笙醫生，
張漢明醫生，周榮新醫生，何鴻光醫生，吳志豪醫生，蘇睿智醫生，黃品立醫生

Back Row (from left):

Dr. CHAN Tsz Tai, Dr. LAM Ho, Dr. CHAN Hau Ngai, Kingsley, Dr. KEI Shiu Kong, Dr. SHEA Tat Ming, Paul, Dr. TONG Kai Sing,
Dr. YEUNG Chiu Fat, Henry, Dr. CHAN Yee Shing, Alvin, Dr. CHAN Nim Tak, Douglas, Dr. LEE Fook Kay, Aaron

Front Row (from left):

Dr. IP Wing Yuk, Josephine, Dr. SIN Pui Yee, Helena, Dr. FUNG Tak Kwan, James (Honorary Secretary),
Dr. HO Chung Ping (Immediate Past President), Dr. CHOI Kin (President), Ms. Jovi LAM,
Dr. YEUNG Hip Wo, Victor (Honorary Treasurer), Dr. CHONG King Yee

Other Council Members:

Dr. Pierre CHAN (Legislative Councillor), Dr. CHENG Chi Man (Vice-President), Dr. MAK Siu King (Vice-President),
Dr. CHAN Siu Kim, Dr. CHAN Tin Sang, Dr. CHEUNG Hon Ming, Dr. CHOW Wing Sun, Dr. HO Hung Kwong, Duncan,
Dr. NG Chi Ho, Dr. SO Yui Chi, Dr. WONG Bun Lap, Bernard

二零二零至二零二一年度會董會成員 The Council 2020-2021

會長	President	蔡 堅醫生	Dr. CHOI Kin
副會長	Vice-Presidents	鄭志文醫生 麥肇敬醫生	Dr. CHENG Chi Man Dr. MAK Siu King
義務秘書	Honorary Secretary	馮德焜醫生	Dr. FUNG Tak Kwan, James
義務司庫	Honorary Treasurer	楊協和醫生	Dr. YEUNG Hip Wo, Victor
前會長	Immediate Past President	何仲平醫生, MH, JP	Dr. HO Chung Ping, MH, JP
立法會議員	Legislative Councillor	陳沛然醫生	Dr. CHAN, Pierre
會董	Council Members	陳厚毅醫生 陳念德醫生 陳小劍醫生 覃天笙醫生 陳子泰醫生 陳以誠醫生 張漢明醫生 莊勁怡醫生 周榮新醫生 何鴻光醫生 葉永玉醫生 紀紹綱醫生 林 賀醫生 李福基醫生 吳志豪醫生 余達明醫生 冼佩儀醫生 蘇睿智醫生 唐繼昇醫生 黃品立醫生 楊超發醫生	Dr. CHAN Hau Ngai, Kingsley Dr. CHAN Nim Tak, Douglas Dr. CHAN Siu Kim Dr. CHAN Tin Sang, Augustine Dr. CHAN Tsz Tai Dr. CHAN Yee Shing, Alvin Dr. CHEUNG Hon Ming Dr. CHONG King Yee Dr. CHOW Wing Sun Dr. HO Hung Kwong, Duncan Dr. IP Wing Yuk, Josephine Dr. KEI Shiu Kong Dr. LAM Ho Dr. LEE Fook Kay, Aaron Dr. NG Chi Ho Dr. SHEA Tat Ming, Paul Dr. SIN Pui Yee, Helena Dr. SO Yui Chi Dr. TONG Kai Sing Dr. WONG Bun Lap, Bernard Dr. YEUNG Chiu Fat, Henry
義務法律顧問	Honorary Legal Advisers	梁定邦大律師 張華恩律師 簡錦輝律師 莊燕玲律師 阮北耀律師 廖羅蓮律師	Mr. Anthony NEOH, S.C. Mr. Woody CHANG Dr. David KAN Ms. Christine TSANG Mr. Philip P.Y. YUEN Ms. June LIAU
義務核數師	Honorary Auditor	李湯陳會計師事務所	Messrs. LI, TANG, CHEN & Co.

傳染病顧問委員會 Advisory Committee on Communicable Diseases

陳子泰醫生
Dr. CHAN Tsz Tai

陳以誠醫生
Dr. CHAN Yee Shing, Alvin

曾祈殷醫生
Dr. TSANG Kay Yan



香港醫學會「有關新冠疫苗的建議」記者招待會
Press conference on The HKMA's Recommendations on COVID-19 Vaccines

傳染病顧問委員會一直致力收集有關新興傳染病，如新冠肺炎的科學理據，並將資料提交予香港醫學會會董會，協助醫學會於二零二零年七月、八月、十一月，及二零二一年二月分別舉行四次記者招待會，向社會大眾講解與新冠肺炎相關的資訊，如入境檢疫、防護裝備、病毒檢測、社交距離、公私營醫療協作、疫苗管理、病毒株變異以及維生素D補充劑等防疫措施的重要性。

本委員會亦邀請了新任衛生防護中心總監林文健醫生與成員進行網上會議，雙方就新冠肺炎抗疫的進展及意見進行了交流及解說。

The Committee has been collecting scientific evidence on emerging infectious disease, most notably COVID-19. The findings were presented to the HKMA Council. They assisted the HKMA in holding COVID-19 related press conferences in Jul 2020, Aug 2020, Nov 2020 and Feb 2021. The Committee focused on the combat against COVID-19, highlighting the importance of border control, protective equipment, viral testing, social distancing, public-private partnership, vaccine administration, mutated viral strains and potential role of vitamin D supplement.

Dr. Ronald LAM, the newly appointed Controller of the Centre for Health Protection, has met with the Committee. Progress and ideas related to COVID-19 were presented and exchanged.



與衛生防護中心總監林文健醫生進行網上會議
Zoom meeting with Dr. Ronald LAM, the Controller of the Centre for Health Protection

二零二零年八月，香港醫學會聯同香港西醫工會、香港公共醫療醫生協會、前線醫生聯盟及立法會醫學界議員陳沛然醫生共同簽署聯合聲明，促請將新冠肺炎列作職業病。此外，本委員會在同年十一月起草了一份中期報告並刊登在醫學會會訊，為會員提供有關新冠肺炎引起血栓風險的論據。

就二零二零年未出現的流感疫苗安全性的爭議，本委員會已即時作出評估並支持繼續使用該疫苗。本委員會亦一直持續監察其他新興病原體，例如耳念珠菌在港爆發的情況。

In August 2020, The HKMA Council co-signed a press statement along with the Hong Kong Doctors Union, Hong Kong Public Doctors' Association, Frontline Doctors' Union and the Legislative Councillor of the Medical Constituency Dr. Hon Pierre CHAN on the need of including COVID-19 as an occupational disease. In addition, the Committee has drafted an interim report and submitted to our Newsletter in Nov 2020. Some evidence on the risk of thrombosis caused by COVID-19 has also been mentioned.

The Committee assessed the controversy with influenza vaccine safety and supported its use in late 2020. The Committee has been monitoring other emerging pathogens such as Candida auris.

香港醫學會合唱團 Choir Committee

莊勁怡醫生

Dr. CHONG King Yee

香港醫學會合唱團的活動因受到疫情影響而停止。我們曾嘗試於二零二零年七月恢復排練，但由於第三波疫情爆發，一切繼續擱置。

醫學會的年度慈善音樂會原本於二零二零年六月舉行，現需延期至疫情消退後再作安排。

期待當我們不需要蒙著嘴相見，限聚令不再時，合唱團的聚會可以回復正常。

楊協和醫生

Dr. YEUNG Hip Wo, Victor

Choir activities have been held up due to COVID-19 pandemic. We tried to resume rehearsal in July 2020 but in vain due to 3rd wave of COVID-19 in our locality.

The HKMA Annual Charity Concert is supposed to be held in June 2020. It would be re-scheduled if the pandemic is under good control.

Hope we can resume choir gathering when we no longer need facemasks and no more prohibition on group gatherings!



生命晚期治療委員會 Committee on End of Life Care

余達明醫生

Dr. SHEA Tat Ming, Paul

為提昇醫生對生命晚期治療的關注，生命晚期治療委員會為會員整合了一些有關生命晚期治療的網上資訊。

有興趣的會員可按此連結 https://www.thkma.org/members/eolc_home.php 及依照下列步驟或掃描右列 QR Code 查詢有關資料。

1. 進入香港醫學會網站 www.thkma.org
2. 登入會員頁面
3. 再到會員主頁
4. 按「茶室」中的「參考資料」
5. 再按 - 「生命晚期治療網上資訊」

To enhance the awareness to medical doctors on End of Life (EOL) Care, the Committee has prepared some online resources on EOL Care on the HKMA's webpage for members' reference.

Interested members can find the information on our website https://www.thkma.org/members/eolc_home.php and follow the steps below, or scan the QR code.

1. Visit www.thkma.org.
2. Click "Member Login" button.
3. Log in to "Members Home".
4. Go to "Reference" at the "Tea House" bottom.
5. Click "EOL Care – Online Resources".



常設委員會主席報告

Reports from Chairmen of Standing Committees

病人組織聯絡委員會 Committee on Relationship with Patient Organizations

覃天笙醫生

Dr. CHAN Tin Sang, Augustine

陳子泰醫生

Dr. CHAN Tsz Tai

陳以誠醫生

Dr. CHAN Yee Shing, Alvin

病人組織聯絡委員會於本年度召開了兩次會議。會議上除了檢視過往與不同病人組織聯繫的經驗外，亦討論委員會的工作方向。

本會於二零二一年獲邀成為脊髓肌肉萎縮症慈善基金推行的「恩慈醫療計劃」的支持機構。該計劃為期兩年，主要為脊髓肌肉萎縮人士及其家人提供遠程醫療及到戶的護理支援服務。團隊由醫生、護士、物理治療師及呼吸機技術人員組成。

本委員會支持成立的兒童家居呼吸支援會（支援會）於二零二一年一月二十八日舉行了第三屆周年會員大會。會上除了委任本年度的會董外，主席亦報告受到二零一九新型冠狀病毒影響，原先獲選為香港醫學會慈善基金慈善音樂會受惠機構的支援會亦因音樂會暫停舉行而擱置推行 18 個月的服務計劃。音樂會的確實舉行日期將會稍後公佈。

有關兒童家居呼吸支援會的未來動向，請瀏覽 www.phress.org。本委員會將繼續支援該會的發展，並協助提高社會大眾對需要使用呼吸機的患者及家屬的了解和支援。

There were 2 committee meetings arranged last year. During the meetings, the committee reviewed the previous collaboration and discussion with patient organizations and discussed our future direction.

HKMA has become the supporting organization of Mercy Medical Management project (MMM) organized by Families of SMA Charitable Trust (FSMA). It is a 2-year project aimed at providing both telemedicine and on-site home visits for SMA patients. The multidisciplinary medical team included doctors, nurses, physiotherapists and ventilator technicians.

The Paediatric Home Respiratory Support Society (PHRESS), which was supported by the committee, organized the 3rd Annual General Meeting (AGM) on 28 January 2021. During the meeting, this year's council members were re-appointed. The chairperson has reported that due to the pandemic of COVID-19, the charity concert of HKMA Charitable Foundation to raise fund for PHRESS's 18-month project was put on hold. The confirmed date of the charitable concert would be announced later.

Please visit www.phress.org if you are interested to learn more about the PHRESS. The committee will continue to provide full support to PHRESS's development and to enhance the public concerns about home respirator users and their families.



兒童家居呼吸支援會於二零二一年一月二十八日舉行的第三屆週年大會
The 3rd Annual General Meeting of PHRESS on 28 January 2021

香港醫學會社區網絡 HKMA Community Network

陳以誠醫生
 Dr. CHAN Yee Shing, Alvin

鄭志文醫生
 Dr. CHENG Chi Man

麥肇敬醫生
 Dr. MAK Siu King

本年度，我們新增了一個男士健康社區網絡，主要舉辦有關男士健康的持續醫學進修課程及推廣男士健康。過去一年，十個社區網絡共舉辦了114節網上授課形式的持續醫學進修課程，讓各區的會員在新型冠狀病毒疫情期間，仍然可以繼續學習最新的醫學資訊和科技發展。

在疫情持續和不斷變化下，來年，醫學會的各個社區網絡將繼續為會員提供不同主題的進修課程和學習機會，致力提升他們對最新醫學應用的認識和技巧。

During the past year, we have set up a new community network, "Men's Health Community Network", to focus on organizing continuing medical education programmes (CME) and promoting men's health. We now have a total of 10 community networks and we have organized a total of 114 CME Live lectures to continuously advance members' medical knowledge and technology development during the COVID-19 pandemic.

With the continuous and changing pandemic, the HKMA Community Networks are committed to organize more diversified topics of CME lectures and learning opportunities to keep members abreast of the medical trend and skills and their applications in the coming year.

社區網絡 Community Network	持續醫學進修課程總數（網上授課） Total No. of CME Lectures Organized (Live Lectures)
港島中西南區社區網絡 Central, Western & Southern Community Network	15
港島東社區網絡 Hong Kong East Community Network	17
九龍城社區網絡 Kowloon City Community Network	7
九龍東社區網絡 Kowloon East Community Network	10
九龍西社區網絡 Kowloon West Community Network	16
新界西社區網絡 New Territories West Community Network	9
沙田社區網絡 Shatin Community Network	15
大埔社區網絡 Tai Po Community Network	--
油尖旺社區網絡 Yau Tsim Mong Community Network	13
男士健康社區網絡 Men's Health Community Network	12

常設委員會主席報告

Reports from Chairmen of Standing Committees

港島中西南區社區網絡 Central, Western & Southern Community Network

易秉賢醫生

Dr. YIK Ping Yin

在過去一年港島中西南區社區網絡舉辦了 15 節網上直播的持續醫學進修課程，為會員在不同渠道下繼續提升醫學知識。本網絡於二零二零年五月六日（星期三）慶祝成立 11 週年，當天的課程主題為「基層醫療的緊急外科手術處理」。來年我們將會舉辦更多元化的題材，令會員繼續學習最新的醫學資訊。

In retrospect, the Central, Western & Southern Community Network has organized 15 Continuing Medical Education (CME) Live lectures for members to obtain advanced medical knowledge in different medical fields. The Network celebrated its 11th Anniversary on Wednesday, 6 May 2020 with the lecture topic on "Surgical Emergencies in Primary Care". In the coming year, we shall organize more lectures to provide the up-to-date medical information to our members.



6.5.2020
講者 Speaker:
謝得言醫生 Dr. TSE Tak Yin, Cyrus



14.10.2020
講者 Speaker:
區兆基醫生 Dr. AU Siu Kie



10.3.2021
講者 Speaker:
陳飛醫生 Dr. CHAN Fei



14.4.2021
講者 Speaker:
許建名醫生 Dr. HUI Kim Ming, Christopher

港島東社區網絡 Hong Kong East Community Network

陳念德醫生

Dr. CHAN Nim Tak, Douglas

本網絡於年內舉辦了 17 節網上直播的持續醫學進修課程。二零二一年一月十六日，我們舉行了為時半日的「生命晚期治療研討會」，讓會員獲取有關寧養護理服務、相關法律問題及疼痛管理的資訊。陳鴻偉醫生、曾昭義醫生、江永明醫生、陳飛醫生及梁萃明律師應邀分享他們的寶貴經驗，讓會員度過了一個充實的下午。

江永明醫生

Dr. KONG Wing Ming, Henry

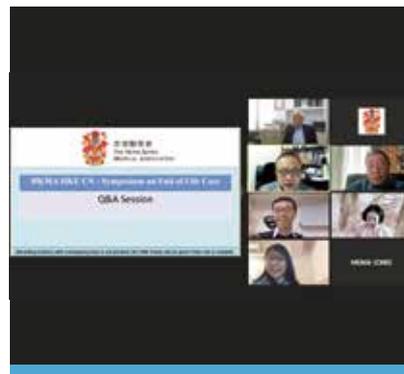
In the year, the Network organized 17 Continuing Medical Education (CME) Live lectures. On 16 January 2021, we organized a half-day "Symposium on End of Life Care" to update members about palliative home care, its legal aspects and pain control issues. Dr. CHAN Hung Wai, Patrick, Dr. TSANG Chiu Yee, Luke, Dr. KONG Wing Ming, Henry, Dr. CHAN Fei, Charles and Ms. Olivia LEUNG shared their valuable experiences. Members had a fruitful afternoon in learning more about end of life care.



13.8.2020
講者 Speaker:
黃汝明醫生 Dr. WONG Yu Ming, Sharon



24.9.2020
講者 Speaker:
藍秀儀醫生 Dr. LAM Sau Yee



16.1.2021
生命晚期治療研討會
Symposium on End of Life Care



25.3.2021
講者 Speaker:
黃啟斌醫生 Dr. WONG Kai Pun

九龍城社區網絡 Kowloon City Community Network

陳文仲醫生
 Dr. CHAN Man Chung

九龍城社區網絡於年內共舉辦了 7 節網上直播的持續醫學進修課程。課程題材廣泛，包括認知障礙症、幼年特發性關節炎、糖尿病、過敏性鼻炎及全身性紅斑性狼瘡等。

錢柱華醫生
 Dr. CHIN Chu Wah

Kowloon City Community Network organized 7 Continuing Medical Education (CME) Live lectures during the year. A diversified topics were covered in the year including dementia, juvenile idiopathic arthritis, diabetes mellitus, allergic rhinitis and systemic lupus erythematosus.



17.7.2020
 講者 Speaker:
 陳鎮中醫生 Dr. CHAN Chun Chung, Ray



30.11.2020
 講者 Speaker:
 周博裕醫生 Dr. CHOW Pok Yu



15.1.2021
 講者 Speaker:
 楊俊業醫生 Dr. YEUNG Chun Yip



26.3.2021
 講者 Speaker:
 曾穎茵醫生 Dr. TSANG Wing Yan

九龍東社區網絡 Kowloon East Community Network

區家駒醫生
 Dr. AU Ka Kui, Gary

本網絡過去一年舉辦網上直播的持續醫學進修課程以及推行公私營醫療合作交流，為會員提供多元化的醫學知識。基督教聯合醫院和香港家庭醫學學院與本網絡繼續合辦共 7 節的「二零二一年全科醫生認證課程」，此系列的網上直播課堂為九龍東區執業的醫生提供互相學習的機會。展望來年，我們將為會員繼續提供更多不同課題的學習機會，讓會員能為病人提供更全面的服務。

The Network was devoted to provide CME Live lectures and to enhance the public-private interface through diversified continuing medical education programmes. The Network's collaboration with the United Christian Hospital and the Hong Kong College of Family Physicians, our long-term partners, is continued in co-organizing the 7-session "Certificate Course for GPs 2021" this year for doctors practicing in Kowloon East districts to exchange medical knowledge. In the coming year, we will offer various learning opportunities on different medical advances to our members so that they could provide holistic care to their patients.



20.7.2020
 講者 Speaker:
 劉展宏醫生 Dr. LAU Chin Wang



6.8.2020
 講者 Speaker:
 陳鎮中醫生 Dr. CHAN Chun Chung



13.11.2020
 講者 Speaker:
 陳偉聰醫生 Dr. CHAN Wai Chung, Kevin



4.2.2021
 講者 Speaker:
 陳智榮醫生 Dr. CHAN Chi Wing, Timmy

常設委員會主席報告

Reports from Chairmen of Standing Committees

九龍西社區網絡 Kowloon West Community Network

唐繼昇醫生

Dr. TONG Kai Sing

本網絡在去年舉辦了 16 節網上直播的持續醫學進修課程，當中包括關於血脂的治療方法、心胸外科手術和毛囊發炎的治理，讓會員學習到不同範疇的醫學知識。為感謝會員一直以來的支持，來年我們將繼續籌辦更多實用的課程，以配合會員的專業發展。

The Network had organized 16 sessions of CME Live lectures in the past year, including topics on Lipid Management, Cardiothoracic Surgery and Acne Management. These lectures provided opportunities for members to enrich their medical knowledge. To express our gratitude to members' supports, we will continue to organise more CME lectures to cater members' development in the following year.



19.5.2020

講者 Speaker:
楊國傑醫生 Dr. YEUNG Kwok Kit, Lawrence



11.8.2020

講者 Speaker:
吳頌基醫生 Dr. NG Chung Kei, Daniel



20.10.2020

講者 Speaker:
溫希蓮醫生 Dr. Helene WAN



27.4.2021

講者 Speaker:
陳裕豪醫生 Dr. CHAN Yu Ho

新界西社區網絡 New Territories West Community Network

張國威醫生

Dr. CHEUNG Kwok Wai, Alvin

本網絡去年繼續為新界西社區執業的會員舉辦 9 節的網上直播的持續醫學進修課程，題材包括心絞痛的治理、腦膜炎和過敏性皮膚炎的處理方法。我們來年將繼續致力舉辦各類題材的課堂，讓會員能夠為病人提供更全面的治療。

In the past year, the Network continued to organize 9 Continuing Medical Education (CME) Live lectures for members practising in New Territories West districts, topics covered Angina Management, Meningococcal Disease and Atopic Dermatitis. We will do our utmost to organize CME lectures with various topics to our members so that they could provide comprehensive management of their patients' medical problems.



26.5.2020

講者 Speaker:
何國棟醫生 Dr. HO Kwok Tung



30.7.2020

講者 Speaker:
張思敏醫生 Dr. CHEUNG Sze Man



21.8.2020

講者 Speaker:
胡惠福醫生 Dr. WU Wai Fuk



27.10.2020

講者 Speaker:
鄧偉德醫生 Dr. TANG Wai Tak, Henry

沙田社區網絡 Shatin Community Network

麥肇敬醫生

Dr. MAK Siu King

本網絡之持續醫學進修課程統籌人麥永健醫生早前離任，由麥肇敬醫生接任主席一職。我們謹借此機會感謝麥永健醫生過去 15 年為沙田社區網絡所作的貢獻。

本網絡自成立以來一直為會員舉辦內容豐富的進修課程。年內，網上直播課程涵蓋哮喘、高血壓、暗瘡及糖尿病等病症，讓聽課的醫生可在日常診症中應用到所學的技巧和知識，從而為病人作出更全面的診斷。

Dr. MAK Wing Kin, CME Convenor of the Network, has stepped down and Dr. MAK Siu King is now the Network's Chairman. We would like to take this opportunity to express our gratitude to Dr. WK MAK for his devotion in the past 15 years.

The Network has been providing informative lectures for members since its establishment. Topics of Live lectures such as asthma, hypertension, acne and diabetes mellitus were covered in the year, so that the participating doctors could apply the skills and knowledge obtained during the talks in their daily practice and provide a more comprehensive diagnosis to their patients.



22.7.2020

講者 Speaker:

黃永強醫生 Dr. WONG Wing Keung, Steven



29.9.2020

講者 Speaker:

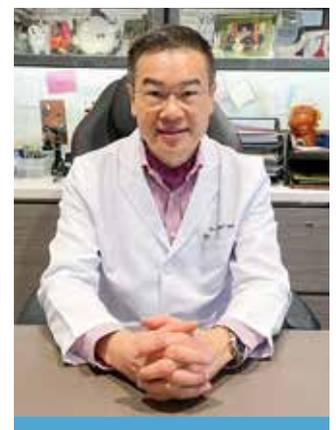
黃潔華醫生 Dr. WONG Kit Wah



23.10.2020

講者 Speaker:

徐俊苗醫生 Dr. TSUI Tsun Miu



16.12.2020

講者 Speaker:

譚一翔醫生 Dr. TAM Yat Cheung

大埔社區網絡 Tai Po Community Network

趙錫河醫生

Dr. CHIU Sik Ho, Bonba

鑒於新型冠狀病毒肆虐，本網絡過往一年沒有舉行面授持續醫學進修課程。

周振軍醫生

Dr. CHOW Chun Kwan, John

The HKMA Tai Po Community Network did not organize continuing medical education programmes with physical participation in the past year because of COVID-19.

常設委員會主席報告

Reports from Chairmen of Standing Committees

油尖旺社區網絡 Yau Tsim Mong Community Network

鄭繼志醫生

Dr. CHENG Kai Chi, Thomas

年內，本網絡舉辦多個網上直播的持續醫學進修課程，題材包括良性前列腺增生、特發性肺纖維化、高血脂、哮喘等。來年我們將會舉辦更多課程，以滿足會員殷切的自我增值需求。

The Network organized various Continuing Medical Education (CME) Live lectures in the year, topics covered benign prostatic hyperplasia, idiopathic pulmonary fibrosis, dyslipidaemia and asthma, etc. We will keep organizing more informative seminars for members to meet their self-upgrading demand next year.



31.7.2020

講者 Speaker:
黃國田醫生 Dr. WONG Kwok Tin, Martin



28.8.2020

講者 Speaker:
黃琮英醫生 Dr. WONG King Ying



16.3.2021

講者 Speaker:
梁耀霖醫生 Dr. LEUNG Yiu Lam



23.4.2021

講者 Speaker:
郭旭龍醫生 Dr. KWOK Yuk Lung

男士健康社區網絡 HKMA Men's Health Community Network

陳以誠醫生

Dr. CHAN Yee Shing, Alvin

鄭志文醫生

Dr. CHENG Chi Man

麥肇敬醫生

Dr. MAK Siu King

男士健康社區網絡於二零二零年成立，旨在增加市民對疾病預防和管理的意識，並喚起男士正視身心健康。

Men's Health Community Network was established in 2020. The objective of this newly formed Network is to increase the public's awareness of disease prevention and management, as well as enhance the awareness of men's physical and mental health in the society.

本網絡的首個活動是二零二零年十一月十六日至二十一日為期六日的「男士健康周」。節目以網上形式進行，內容包括共 12 節的持續醫學進修課程、專題課程、以及共 10 節的研討會和公眾講座。我們邀請了不同專科領域的醫生及專業人士，講解及討論常見的疾病和切身的健康話題，例如癌症、良性前列腺增生、糖尿病、男士抑鬱症、男士更年期、男士脫髮、血尿及運動創傷。

Its debut event was the 6-day Men's Health Week during 16 to 21 November 2020. The programme included 12 sessions CME Live lectures and keynote lectures, and 10 sessions round table discussions and public talks through online platforms. Speakers from various specialties were invited to present on commonly encountered diseases like cancer, BPH, diabetes mellitus, male depression, andropause, male hair loss, hematuria and sport injury.

16.11.2020

開幕典禮 Opening ceremony





17.11.2020
 研討會 Round Table Discussion



18.11.2020
 研討會 Round Table Discussion



19.11.2020
 研討會 Round Table Discussion



20.11.2020
 研討會 Round Table Discussion



21.11.2020
 運動及運動創傷研討會 Symposium on Exercise & Sports Injury

社區服務委員會 Community Service Committee

陳念德醫生

Dr. CHAN Nim Tak, Douglas

唐繼昇醫生

Dr. TONG Kai Sing

楊協和醫生

Dr. YEUNG Hip Wo, Victor

由熱心人士慷慨捐款支持的「醫家耆康社區學堂」，自二零一九年十二月開始以來一直支援柴灣區的長者。全賴醫生及其他義工的全力支持，計劃得到熱心人士繼續捐款並延長服務至二零二二年六月。在疫情的陰霾下，長者在家中抗疫面對很多困難。而過往的社區服務模式亦遇到很大的挑戰，許多恆常的長者服務被迫停止，社區支援也更見重要。



Community Elderly Health Academy

The one-year project “Community Elderly Health Academy” was started in December 2019 with the generosity of our donor. With the enthusiastic support from doctors and other volunteers, the donor agreed to support the extension of the project to June 2022. During the COVID-19 pandemic, elderly not only faced huge challenge in fighting against the disease, but also were unable to get sufficient community support due to the suspension of social services, hence community support became very important to them.



The Chai Wan Outreach Team for the Elderly

The Chai Wan Outreach Team for the Elderly was formed by 25 core community volunteers, together with doctors, nurses, medical and allied health students, to follow up the health condition of 35 singleton or elderly couples regularly. Due to COVID-19, the original monthly home visits were

柴灣社區服務計劃由達 25 人的地區核心資深老友記外展大使，加上醫生、護士、及醫護學生組成義工團隊，長期跟進 35 戶獨居或雙老長者的健康狀況。由於疫情關係，全年的大型探訪取消，部分探訪轉為上門派發防疫物資。在疫情稍緩時，我們把握時間與醫生義工上門為有健康需要的老友記作檢查及跟進。義工們以電話慰問的方式延續關愛，一眾義工於疫情期間透過電話問候邨內的長者。除電話關顧外，在中秋節等節慶日子，義工透過郵寄心意卡到長者手中表達關心。義工訓練改為網上授課，團隊亦嘗試將直播訓練內容加以轉化為文字及圖片，發放予義工群組方便閱讀。

changed to anti-pandemic materials delivery, “Call to Care Team” was set up to send love and care through phone calls. With the ease of the pandemic, doctor volunteers visited elderly with special health issue for check-up and referral. Besides, volunteers also prepared greeting cards to the elderly during mid-autumn festival and Christmas. Online volunteer trainings were organized for volunteers via Zoom. We have summarized the online training materials into text and images and distributed to volunteers who did not have Zoom through WhatsApp.

大使隊所建立的社區互助網絡在疫情期間更見重要。在疫情下，有 94 歲長者因住在內地的照顧者未能來港而難以維持日常生活，幸得地區義工的協助，購買日用品和食物才能解決問題。義工在此段困難時間，產生了不少社區互助的故事，如分享口罩及消毒用品、傳遞社區疫情資訊等等，充分發揮守望相助的精神。

The mutual support network established by Outreach Team for the Elderly in the community became most important during the COVID-19 pandemic. A 94-year old elderly had difficulty in maintaining her daily life as her carer was forced to stay in mainland. Fortunately, a community volunteer taken up the role as temporary carer and helped the 94-year old lady to purchase daily essentials. More touching community stories like sharing the anti-pandemic materials and pandemic information were found during such difficult times.





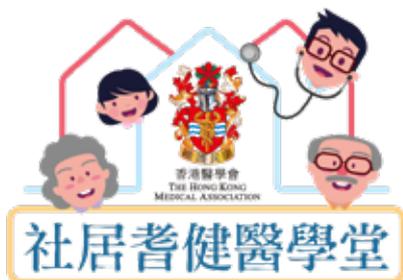
疫情雖然令實體活動停頓，亦令團隊積極地推動「網上老友記健康大學」。職員率先教導已擁有智能手機的地區義工及老友記使用醫學會的網上學習平台，留家抗疫仍能繼續學習。現時，我們更與柴灣的長者中心合作，一方面，使用智能電話的老友記可以在家中收看網上課程；另一方面，中心亦安排小型的網上健康課程放映會，讓未有智能電話的老友記可在中心現場收看。

與此同時，團隊推出了「平板電腦借用計劃」及「耆齡智能新體驗 - 手機捐贈計劃」，讓未有智能電話的老友記體驗一下網上學習。醫學會特意購置了三部 iPad，讓老友記透過「平板電腦借用計劃」輪流借用學習。而「耆齡智能新體驗 - 手機捐贈計劃」則旨在鼓勵會員及義工捐贈舊的手提電話讓有經濟困難的長者使用。詳情可參考以下二維碼 (QR Code)。由於未能上門探訪傳遞健康資訊，社區服務團隊特意製作了一系列「健康資訊小冊子」及五種長者常見疾病的健康小冊子向老友記傳遞健康資訊，並定期以郵寄方式送到老友記手中。



Although face-to-face activities were suspended, the community service team strived to develop **Online Health Academy for the Elderly**. We taught elderly with smartphones in using our online learning platform so that they could keep learning at home. The online service was expanded to elderly service partners in Chai Wan, more elderly could also keep updated with knowledge on disease management. In addition, special live seminars were set up in elderly service centres for elderly who have no smartphone to enjoy the online health programme.

To facilitate elderly participation in online health academy, 'iPad Lending Scheme' and 'Smartphone Donation Scheme' were launched. 3 iPads were prepared to encourage the elderly with no smartphone to experience browsing the internet and online learning. Smartphone Donation Scheme was a scheme to collect old smartphones for the elderly with financial difficulties. You can learn more about the scheme through the QR code below. A series of health leaflet and health pamphlet on five common elderly diseases were also printed for the elderly which were regularly mailed to them.



由社區投資共享基金撥款支持於葵涌區推行的「社居耆健醫學堂」計劃已踏入第三年，這一年我們與社區同樣經歷前所未見的挑戰。然而，有危就有機，疫情讓社區服務突破框架，將固有服務轉化成以嶄新形式繼續服務社區，支援長者「居家抗疫」。

The "Community Health Academy for Elderly" project, funded by Community Investment and Inclusion Fund, has been implemented in Kwai Chung in its third year. Although we faced unprecedented challenges this year, every trouble tuned out to a ray of hope, new forms of services were inspired! The spirit of serving our community and keeping our elderly safe was never stopped.



「老友記健康大學」

疫情期間，為了減低長者感染的風險，老友記健康大學所舉辦的面授課堂均需要取消。然而，長者長時間留在家中抗疫，對他們的的健康和情緒也有很大的影響，因此「老友記健康大學」將傳統面授課程轉為網上授課，實行停課不停學！由疫情爆發至今，我們已透過 WhatsApp 向長者學員發送 70 次抗疫及健康資訊，幫助長者接收正確資訊之餘，亦同時鼓勵他們在家中繼續學習。

在長者參與網上學習期間，社區計劃團隊幫助有需要的長者克服各種科技問題。「老友記健康大學」第二學期終於在二零二零年八月順利開展 Zoom 及 Facebook 直播，透過即時聲音和影像與 44 位長者有更多互動。「網上老友記健康大學」推行後，我們接獲葵涌區以外的長者查詢及報名，因此我們亦將資源分享並支援其他地區在家抗疫的長者，直至現時已有 85 位來自葵涌及其他地區的學員報讀「老友記健康大學」！透過網上直播，我們更與長者於網上舉行聖誕和新年慶祝活動，利用科技一起歡聚！

Health Academy for the Elderly

In order to reduce the risk of infection, face-to-face classes were cancelled last year. In light of keeping physical and mental health of elderly was also important under social distancing, the Health Academy for the Elderly developed online teaching to keep them healthy and stay active at home. Since the beginning of the outbreak, a total of 70 disease and anti-pandemic videos were sent to elderly students through WhatsApp twice a week to remind them to be aware of their health condition and proper ways of disease prevention.

It is not easy to motivate elderly to use technology and to participate in distance learning, project team never gave up to help the elderly in solving various online learning problems. Fortunately, the online Health Academy for the Elderly successfully launched on Zoom and Facebook in August 2020. A total of 44 elderly students were much engaged in the interactive online classes with live images and sound. Meanwhile, the online Health Academy for the Elderly also supported more elderly across districts who seek for activities during social distancing, we are so glad that a total of 85 elderly students have already joined the Academy since the project started! Apart from online teaching, two special live festive celebration programmes were organized for the elderly during Christmas and Chinese New Year, delivering our blessings and love in virtual gatherings!

患者及其家人應如何應對疥瘡

- 儘速求醫
- 醫生會處方殺滅疥瘡的乳劑及止痕藥物
- 患者的家人亦應諮詢醫生意見，檢查有否受到感染
- 家人在接觸患者前後都必須徹底清潔雙手
- 患者的衣物、毛巾和被單應分開清洗，並使用水溫達60度的水清洗
- 徹底清潔家中共用的設備和丟棄共用的面霜和乳液



「老友記外展大使隊」

為避免感染，老友記外展大使本年度的大型探訪活動均需取消。然而，我們非常感謝義工及大使們於疫情期間仍然發揮服務社區的精神，協助派發抗疫物資，並於派發時為健康有需要的長者檢查身體。在疫情反覆的日子，義工們都利用各種方法與長者連繫。一班資深老友記外展大使定期致電慰問長者，傳遞最新的防疫及社區資訊，並協助留意長者的健康情況。而學生外展大使亦運用自身知識拍攝一系列防疫短片，製作長者健腦遊戲短片和營養飲食單張等。另外，青年義工亦為在家抗疫的獨居長者製作窩心短片並送上心意卡為長者打氣，令長者們深受感動！

計劃冀望義工在服務社群的同時，可以有所得著和成長。雖然疫情期間我們未能與義工們進行面對面的義工訓練，但卻因此衍生新的方式，利用社交媒體發展網上義工訓練，拉近與青年義工的距離。社區服務團隊於Instagram已進行超過60次的義工訓練及分享，定期與義工分享探訪和溝通技巧，透過互動遊戲與青年義工分享心得。為了兼顧更深入的義工訓練，我們亦於年內舉辦6次網上遙距義工訓練，反應踴躍。



Outreach Team for the Elderly

Though the large-scale home visits were suspended this year, our Outreach Ambassadors continued to support the needy elderly in all ways. Doctors and volunteers settled the elders' urgent needs by distributing masks and hand sanitizers and conducted simple health checks amid COVID-19 outbreaks. Community volunteers gave care on the elderly health conditions and delivered the diseases prevention information by regular caring calls. At the same time, student volunteers applied their knowledge to serve the community by making a series of hygiene education and brain challenging videos, healthy eating leaflet, etc. In a time of social distancing, many elderly were cheered and truly impressed by the volunteers' heartwarming cards and videos!

Volunteers' contribution to the community and their personal development are equally important. The COVID-19 pandemic has inspired us new ways to conduct training and connect young volunteers by using social media. More than 60 times of online volunteer training on home visit skills and interactive sharing games were regularly conducted on Instagram. In order to increase the interaction with volunteers and conduct in-depth volunteer training, a total of 6 times online distance training were also organized this year to develop their skills in various aspects.



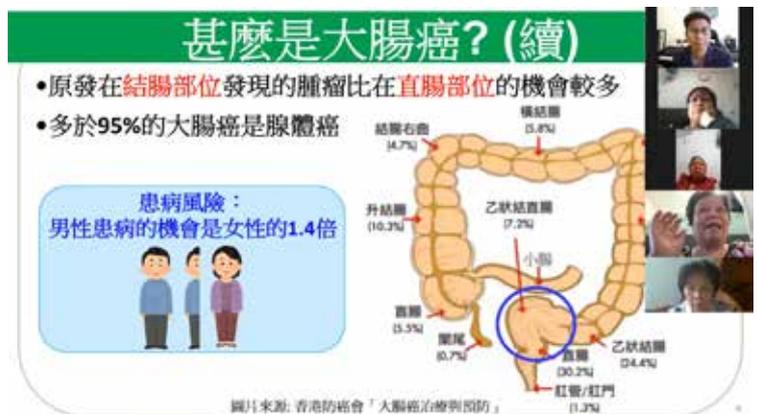
「醫生單位一線通」

疫情的出現，讓傳統的社會服務帶來前所未見的影響。為避免長者及長期病患者受到感染，不少社區服務和活動因此被迫暫定。為了支援有關服務影響，「醫生單位一線通」一直守護社區，健康諮詢服務無間斷服務，透過醫生信箱協助因活動取消或忌諱疫情而不敢求醫的長者，健康外展服務亦上門為有特別健康困難的長者檢查及轉介。另外，我們亦透過網上遙距平台與不同的社福夥伴單位進行7次網上健康講座直播，將資源共享，令不同地區的長者也能受惠。



Doctors-Units Instant Link Scheme

To reduce the risk of infection in elderly or patients with chronic illness, many regular social services or activities were forced to suspend under COVID-19 pandemic which causing some elderly became unable to cope with their health issues, some even unwilling to seek for medical help because the fear of being infected. In view of this situation, the health consultation of Doctors-Units Instant Link Scheme was fully used during this difficult period, voluntary doctors answered the elders' health questions through doctor's mailbox and reached out to homes of elders with special health problems. To support the period of activities suspension, community team also joined hands with social services partners to organize 7 online health seminars via Zoom and YouTube, making best use of resources with our community partners to support each other to get through these tough times!



另外，有鑑於坊間存有對二零一九冠狀病毒的傳聞和誤解，社區計劃團隊特別邀請義務醫生參與攝製「二零一九冠狀病毒小知識短片」及進行「流感及肺炎球菌疫苗」網上健康講座，釐清坊間謬誤，深入淺出拆解病毒和日常生活上需要注意的重點，以及流感及肺炎球菌疫苗與預防新冠病毒的重要，以正確方法及態度繼續抗疫。六輯影片已分別發送予區內長者社福服務單位及上載至 YouTube 讓公眾人士觀看。詳情可瀏覽右列的二維碼了解更多。

To help the public better understanding on the facts of COVID-19, 7 voluntary doctors were invited to take part in a special series of COVID-19 health education. A total of six videos were produced and an online health seminar on influenza and pneumococcal vaccine was organized for the community. The 6 health education videos of COVID-19 were published on HKMA YouTube Channel for public viewing. Interesting members can scan the QR code for more information.



最後，我們衷心感謝所有參與各社區計劃的醫生、醫科學生、其他醫護專職和學生，以及一眾地區義工。在過去一年的疫情期間，仍然投入參與醫學會舉辦的義工服務，支援社區上的長者。來年，我們將繼續推行更多社區服務，維護民康，希望大家繼續踴躍參與！

Nevertheless, we would like to dedicate our heartfelt thanks to our members, medical students, nurses, other nursing and allied students, as well as our community volunteers to contribute their times and helping hands to our community projects during the pandemic to support the elderly in need! In the coming year, we are committed to push in more effort in serving the community and to safeguard the health of the people, this will not be success without your continuous support!



特別鳴謝 Acknowledge

社區投資共享基金（基金）於2002年由香港特別行政區政府成立，在社區推行多元化的社會資本發展計劃，推動市民及社會各界發揮凹凸互補精神，齊心建立跨界別協作平台及社會支援網絡，從而建立互助互信、守望相助、社區凝聚力等社會資本，讓個人、家庭及組織互相支援，令社區能力得以提升。

Community Investment and Inclusion Fund (CIIF) was set up by the Government of the Hong Kong Special Administrative Region in 2002 to implement diversified social capital development projects in the community, promote reciprocity between the public and different sectors, and build together a cross-sectoral collaborative platforms and social support networks. The Fund seeks to build social capital – to garner mutual trust, spirit of cooperation and social cohesion, and enhance mutual support among individuals, families and organisations so that our community can grow from strength to strength.

「社區動起來 到處人情在」！
 Energise the Community, Build a Caring Society!

勞工及福利局 社區投資共享基金秘書處
 Community Investment and Inclusion Fund Secretariat || Labour and Welfare Bureau
 網址 Website: www.ciif.gov.hk
 Facebook 網頁 Fans page: www.facebook.com/ciif.hk

常設委員會主席報告

Reports from Chairmen of Standing Committees

持續醫學進修委員會 Continuing Medical Education (CME) Committee

鄭志文醫生
Dr. CHENG Chi Man

何鴻光醫生
Dr. HO Hung Kwong, Duncan

林賀醫生
Dr. LAM Ho

麥肇敬醫生
Dr. MAK Siu King

一直以來，香港醫學會致力推動持續醫學教育，迄今已有超過 1605 位普通科醫生選擇醫學會為其持續進修計劃之管理機構。在二零二零至二一年，委員會繼續與養和醫院及港怡醫院合辦結構化進修課程。委員會亦同時與社區網絡、各類醫療機構及各藥廠合作，舉辦不同類型的講座及證書課程。



二零二一年三月二日由香港醫學會及養和醫院合辦持續醫學進修網上課程
HKMA & HKSH CME Live Lecture on 2 March 2021

今年是《持續醫學進修專訊》創刊的第二十一年，委員會謹感謝過去多年在《持續醫學進修專訊》提供著作的每一位作者。與此同時，我們誠意邀請各會員向編輯委員會投稿，攜手促進業界精益求精的進修文化。

因應新冠肺炎疫情，本會開創持續醫學進修網上課程，並積極發展 Facebook Live 及 Zoom 等網上平台，在疫下繼續為醫生提供高質素、易操作的網上進修課程。由二零二零年七月至二零二一年六月，本會合計舉辦超過 164 堂網上課堂，每堂參加人次平均逾 300 人，共給予 58,618 學分。此外，本會亦於二零二一年四月起在本會網站推出每月自修系列影片，為會員提供另一個網上進修的新途徑。

The Hong Kong Medical Association has long been an advocate in CME, more than 1605 non-specialists have registered HKMA as their CME Administrator. In year 2020-2021, the Committee continued the collaboration with the Hong Kong Sanatorium Hospital and Gleneagles Hong Kong Hospital in organizing regular Structured CME Programme. The Committee also co-organized lectures, seminars and certificate courses in a broad strata of topics with the HKMA Community Networks, different medical organizations and various pharmaceutical companies.

This year marks the 21st year since the first distribution of the CME Bulletin. We would like to express our gratitude to authors who have generously shared their knowledge and wisdom in their specialty on the CME Bulletin platform. Meanwhile, interested contributors are always welcome to submit your articles to the Editorial Board for publication to foster a more vibrant environment of CME throughout the profession.

Due to the COVID-19 epidemic, the HKMA pioneered the CME Live Lectures and has put continuous efforts into exploring new online webinar platforms such as Facebook Live and Zoom, so as to provide high quality and easy-to-access CME Live Lectures to fellow doctors. During the period of July 2020 to June 2021, the HKMA has organized more than 164 CME Live Lectures with an average of over 300 doctors attending each Live Lecture, awarding a total of 58,618 CME Points. In addition, the HKMA has launched a Monthly Self-Study Video series on the HKMA website since April 2021, providing an additional pathway for online CME studies.

二零二零年七月至二零二一年六月 July 2020 – June 2021	項目總數 No. of Events
由香港醫學會舉辦的持續醫學進修項目 No. of CME events organized by HKMA	164
向香港醫學會申請並獲批積分的持續醫學進修項目 No. of CME events accredited by HKMA	135



二零二零年十一月二十四日由香港醫學會及港怡醫院合辦持續醫學進修網上課程
HKMA & GHK CME Live Lecture on 24 November 2020



二零二零年十月二十四日香港醫學會於灣仔會所進行持續醫學進修網上課程 — 頒贈紀念品予講者
Souvenir presentation to the Speakers at CME Live Lecture at Wanchai Premises on 24 October 2020



二零二零年十一月十八日於中環會所進行持續醫學進修網上課程 (男士健康社區網絡)
CME Live Lecture at Central Premises on 18 November 2020 (Men's Health Community Network)

財務委員會 Finance Committee

楊協和醫生

Dr. YEUNG Hip Wo, Victor

去年，財務委員會召開了八次會議以檢討本會的投資組合和流動資金狀況。

1. 委員會檢視本會的投資組合，銀行代表及財務顧問亦提供了有關不同股票和投資市場未來趨勢的信息。為了平衡本會的投資組合，本會決定出售匯豐股票、購買盈富基金及減持人民幣。
2. 本會現持有相等於 13,560,000 元港幣市值的 11,450,000 元人民幣，去年以存款利率 0.50% 至 2.78%，於交通銀行銀行定存 1 星期至 3 個月。
3. 由於新冠肺炎疫情關係，本會所有收入大幅減少，特別是股息收益。為了增加收入，本會更換了投資組合。作為最後的方法，本會在萬不得已的情況下，可能考慮重新收取會費以維持本會持續發展。

The Finance Committee held eight meetings in the past year to review the investment and liquidity position of the Association.

1. The Committee reviewed the HKMA's current shares portfolio with advice from banks. The bank representatives and financial consultant provided information on different stocks and the future trends of the investment market. In order to achieve a more balanced investment portfolio, the Committee decided to sell HSBC stock, purchase the Tracker Fund of Hong Kong stock as well as reduce holding in RMB.
2. Funds held in RMB amounting to 11.45 million (equivalent to HK\$13.56 million) were placed in time deposits of 1-week to 3-month duration at the interest rates ranging from 0.50% to 2.78% at the Bank of Communications.
3. Due to COVID-19, all of our income, especially stock dividends, reduced significantly. We have updated our investment portfolio in order to generate more income in the near future. As a last resort, we might need to consider recollecting yearly subscription fee in order to sustain our Association operation and development.

會所管理委員會 House Committee

葉永玉醫生

Dr. IP Wing Yuk

為減低 2019 冠狀病毒病的傳播風險，本會兩間住於中環及灣仔的會所都採取有效的防疫措施及加裝符合法例要求的空氣淨化設備。

兩間會所將繼續為會員及其親友提供優質餐飲服務。歡迎會員舉辦科學講座、康樂及社交聚會等。預約請致電 2527 8324（灣仔），2536 9388（中環）。

本會雲咸街的物業樓齡已高，業主將探討大廈整體維修工作的安排。

To minimize the risk of contracting and spreading COVID-19, the 2 Clubhouses located in Wanchai and Central are adopting every social distancing measures and hygiene control. We have also installed air purifiers that meet the regulations to ensure the air flow in dine-in area.

Both Wanchai and Central Clubhouses will continue to provide quality food and wine for scientific lectures and leisure and social gatherings, for members and their friends and families. To reserve your table, please ring: Wanchai 2527 8324; Central 2536 9388.

The owners committee of Wyndham Mansion is exploring how inspection and repair works can be properly done.

資訊科技委員會 Information Technology Committee

陳子泰醫生

Dr. CHAN Tsz Tai

至二零二一年三月底，一共有 191 位私人執業醫生申請安裝計劃內的電子健康紀錄互通系統。鑑於遠程醫療發展備受關注，委員會亦安排了會員參觀中文大學醫院以了解科技應用，並於二零二一年一月舉行了三維打印興趣小組講座。



麥肇敬醫生

Dr. MAK Siu King

As at the end of March 2021, 191 Private Medical Practitioners (PMPs) have signed up for eHealth Record Sharing System (eHRSS) under the Wenchang Project. In consideration of telemedicine development, Information Technology Committee arranged visit to CUHK Medical Centre which enabled members to understand technology application. In addition, 3D printing interest group seminar was arranged in January 2021.

國際事務委員會 International Affairs Committee

覃天笙醫生

Dr CHAN Tin Sang, Augustine

陳子泰醫生

Dr CHAN Tsz Tai

陳以誠醫生

Dr CHAN Yee Shing, Alvin

香港醫學會作為世界醫學會和亞洲及太平洋醫學組織聯盟的成員，一直以來都有參與兩個組織的事務。

第三十五屆亞洲及大洋洲醫學組織聯盟大會

由於新冠肺炎疫情肆虐全球，第三十五屆亞洲及大洋洲醫學組織聯盟大會延遲至二零二一年舉行。

我們早前已呈交一份《國家報告》，簡述香港醫學會過去一年的工作。另外亦準備了一份《應對新冠肺炎報告》，概括香港特區政府與香港醫學會攜手抗疫的對策。兩份報告已上載至大會網頁 www.cmaao.org。

二零二零年世界醫學會年會

疫情關係，二零二零年世界醫學會年會於二零二零年十月三十日以網上形式舉行。陳以誠醫生獲委任為本會投票代表。陳子泰醫生則以觀察者身份參與會議。

美國的代表 David BARBE 醫生任命為今屆會長（2020-2021），接替卸任會長（2019-2020）來自巴西的 Miguel JORGE 醫生。而來自瑞典的 Heidi STENSMYREN 醫生則當選為下屆會長（2021-2022）。

本會在二零二零年十月二十九日曾去信世界醫學會，表達香港醫生對於該會二零一九年十一月十九日發出的新聞稿「世界醫學會對香港醫療體系瀕臨崩潰予以強烈譴責」的回應，認為新聞稿標題未能反映香港當時真實的醫療情況，導致國際上對本港醫療專業人士抱有錯誤觀感。

悼念亞洲及大洋洲醫學組織聯盟主席

前印度醫學會會長及亞洲及大洋洲醫學組織聯盟主席 Dr. KK Aggarwal 因感染新冠肺炎離世，本會深表哀悼，已發悼詞向家屬、亞洲及大洋洲醫學組織聯盟及印度醫學會表達慰問。

向印度提供緊急援助

印度疫情嚴重，歿患枕藉。本會收到印度醫學會來函，該國醫療物資缺乏，經濟亦大為不振，遂呼籲本會提供協助。會董於二零二一年六月的會議上一致同意緊急捐助五千元，以盡綿力。

The Hong Kong Medical Association (HKMA), being member of the World Medical Association (WMA) and the Confederation of Medical Associations in Asia and Oceania (CMAAO), takes part in the affairs of the two organizations from time to time.

35th CMAAO General Assembly

Due to the threat and influence of COVID-19 pandemic, the 35th CMAAO General Assembly has been postponed to 2021.

We have submitted a **Country Report** about the activities of the HKMA in the past year and a **Report about the Countermeasures against COVID-19** illustrating the combined effort of the HKSAR Government and the HKMA in combating the pandemic. The reports are available at CMAAO's webpage www.cmaao.org.

2020 WMA General Assembly

The WMA General Assembly 2020 was held in online format on 30 October 2020 due to COVID-19. Dr. CHAN Yee Shing, Alvin was appointed the voting delegate at the event. Dr. CHAN Tsz Tai also joined the meeting as observer.

Dr. David BARBE from the United States, was installed as the new President for the period 2020-2021, succeeding the outgoing President (2019-2020), Dr. Miguel JORGE from Brazil. Dr. Heidi STENSMYREN from Sweden was elected as the President Elect (to preside in the period 2021-2022).

The HKMA issued a letter to the WMA on 29 Oct 2020 voiced out the feedbacks from doctors in Hong Kong on their concerns about the WMA press statement titled "World Medical Association Deplores Breakdown in Hong Kong Medical Care" released on 19 November 2019. It was pointed out that the title of the press statement fails to reflect the genuine medical care situation in Hong Kong at that time and causes a false impression on our healthcare professionals.

Passing of President of CMAAO

We were saddened to learn of the death of Dr. KK Aggarwal, former National President of the Indian Medical Association and President of the CMAAO, after a lengthy battle with COVID-19. Condolences has been sent to his family, CMAAO and IMA.

Emergency relief for India

India has been hard hit by a surge of COVID-19 cases, with a death toll rising over 300,000. The country suffered from a lack of medical resources as well as a distorted economy. The India Medical Association, also a member of CMAAO, called the HKMA to help. Council Members thus agreed at the Council meeting in June 2021 to support India Medical Association with US\$5,000 as emergency relief.

醫療保障計劃管理委員會 Management Committee on Medical Protection Scheme

鄭志文醫生
Dr. CHENG Chi Man

積極與醫療保障協會溝通

在二零二零年至二零二一年，由於新冠肺炎疫情，醫學會與醫療保障協會團隊未能舉行面對面會議，但保持定期遠程會議，與協會倫敦總部緊密聯繫。

二零二一年三月，協會發出聲明指香港醫學會為其香港醫生計劃唯一的合作伙伴。

香港醫學會將繼續從會員出發點與醫療保障協會溝通協調，盡力與各方合作、平衡利益，為香港整體醫療發展的配套作最好的長遠安排。

人力專責委員會 Manpower Committee

鄭志文醫生
Dr. CHENG Chi Man

為配合發展需要，特別加強了網上持續醫學進修講座和醫療保障計劃方面的人力資源。香港醫學會現有 35 名編制職員，有 27 名秘書處辦事處人員、4 名會所餐飲侍應，及 4 名基金資助的社區服務員工。

我們在二零二零年十二月進行了員工年度考績，由於新冠肺炎疫情關係及經濟環境不明朗，我們決定凍結員工薪酬。為激勵員工士氣，如員工表現良好，每月可獲辛勞津貼，計算準則是根據市場通脹率計算。

香港醫學會秘書處推行彈性上班時間多年。新冠肺炎疫情下，秘書處為員工安排在家工作，以減低感染風險。為鼓勵員工接種疫苗，秘書處推行疫苗假期，讓員工在接種疫苗後好好休息。

會員服務委員會 Membership Services Committee

陳厚毅醫生
Dr. CHAN Hau Ngai, Kingsley

有見 2019 冠狀病毒疫情嚴峻，委員會為會員搜羅了抗疫塗層服務及非接觸式付款方法，以減低傳染風險。

三間保險公司：AXA 安盛、保柏（亞洲）有限公司和保柏國際（前 BUPA-iHi），繼續為香港醫學會會員提供醫療及住院保險特別優惠。由於住院和手術個案在二零一九年有增加的趨勢，以及醫療技術的進步，AXA 安盛二零二零至二零一年度的續期保費增加了 5%。至於保柏（亞洲）的續期保費則增加了 10%。如欲查詢詳情，請聯絡相關公司。

蔡堅醫生
Dr. CHOI Kin

Meetings with MPS

In 2020 - 2021, due to COVID-19, the HKMA Council and MPS' executive team were not able to have physical meeting but continued to have regular tele-conferences with London headquarter to keep in close connection.

In March 2021, MPS released an official statement clarifying The Hong Kong Medical Association is the only partner and contact point for their doctor membership scheme in Hong Kong.

The HKMA will always stand by our members to negotiate with MPS, and offer as much assistance as we could to work for the best provision of medical protection for the medical sector of Hong Kong.

蔡堅醫生
Dr. CHOI Kin

To cope with development needs, manpower is enhanced for functions such as Continuing Medical Education Live Lecture and Medical Protection Scheme Service. The HKMA currently maintains an establishment of 35 staff in total, 27 office staff, 4 restaurant staff, and 4 community project staff fully funded by sponsors.

Staff performance appraisal was reviewed in December 2020. Due to COVID-19 and uncertain economic situation, staff salary was frozen. In order to boost staff morale, discretionary monthly hardship allowance will be distributed to staff with satisfactory performance. The monthly hardship allowance is calculated based on the market inflation rate.

The HKMA Secretariat has implemented staggered working hours for many years. Due to COVID-19, the HKMA has arranged staff to work from home to reduce infection risk. The HKMA Secretariat has also implemented "Vaccination Leave" to encourage staff to take COVID-19 vaccines.

楊協和醫生
Dr. YEUNG Hip Wo, Victor

In view of the COVID-19 pandemic, the committee has introduced the discount offer on disinfection coating service and contactless payment solution to members in order to minimize the infection risk.

Three insurance companies, namely AXA Hong Kong, BUPA (Asia) Ltd., and BUPA (Global) (previously known as BUPA-iHi), continued their special offers on medical and hospitalization plans to HKMA members. Due to an increasing trend of hospitalization and surgery in 2019 as well as medical technology advancement, AXA added 5% in the premium for the year 2020-2021. As for BUPA (Asia), there was 10% increase in renewal premium. Please feel free to contact the relevant companies for details.

會訊出版委員會 Newsletter Committee

鄭志文醫生
Dr. CHENG Chi Man

多年來，《香港醫學會會訊》都為會員提供各類重要資訊，內容涵蓋政策、時事、執業資訊、法律意見及本會活動等。

在二零二一年五月，《會訊》進行了一次改版，無論在設計或內容上，都為會員帶來煥然一新的感覺。會員現可以投稿分享有關飲食、寵物或旅遊的文章。在此謹代表會訊出版委員會衷心感謝投稿支持《會訊》的朋友。

即使疫情持續令香港經濟受挫，我們仍能達至收支平衡，甚或獲得盈餘。我們期望會訊的新面貌可吸引更多廣告商選用此平台推廣其產品及服務。亦請大家來年繼續支持。

為提倡環保及節省開支，我們已停止向海外會員郵寄《會訊》印刷本，並鼓勵居住在海外的會員到醫學會網頁瀏覽電子版本。

會員如對《會訊》有任何意見，歡迎電郵至 editor@hkma.org / hkmanews@hkma.org。



Over the years, the HKMA News has been instrumental in bringing important information to members, such as government policies, practice information, legal advices and Association activities etc.

In May 2021, the HKMA News had a facelift, both in its layouts and the content, with the hope to give members a refreshed reading experience. Members can now contribute articles in 3 categories: Travel, Food and Pets. On behalf of the Committee, I would like to thank our members who have contributed to the News.

Even though Hong Kong's economy is still being haunted by COVID-19, we are able to maintain a balanced account with some surplus. We hope that the new look would attract more advertisers to choose our platform for promoting their products and services. And we count on your continued support in the coming year.

For environmental protection concerns and smart spending, we have ceased sending hard copies of the HKMA News to overseas members. Members living abroad are encouraged to read the monthly HKMA News online at the HKMA website.

If you have any comment regarding the HKMA News, please write to editor@hkma.org / hkmanews@hkma.org.



康樂及文化委員會 Recreational and Cultural Committee

冼佩儀醫生

Dr. SIN Pui Yee, Helena

鑑於 2019 冠狀病毒疫情下的各項社交距離措施，康樂及文化委員會轄下的攝影會於二零二零至二零二一年舉辦了首個網上公開展覽紀念成立 10 周年。而攝影比賽亦改以網上形式舉行。攝影會於每季發出電子雜誌，並輔以特別通告，向會員提供最新的展覽及醫學會活動資訊。攝影會更於醫學會灣仔會所設立了圖書館，讓會員分享他們和著名攝影師的相集。

Due to the social distancing measures under COVID-19 pandemic, the Photo Photographic Society (HKMAPS) under the Recreational and Cultural Committee held its first-ever virtual public exhibition to celebrate its 10th anniversary in Year 2020-2021. The Photo Competitions were also held in online format. To keep the HKMAPS members updated with the latest photographic exhibitions and information of our activities, a quarterly e-Newsletter was issued, supplemented by ad hoc notices. The HKMAPS also set up a library in the HKMA Wanchai Clubhouse for members to share their works and those of well-known photographers.

活動一覽 Activities at a Glance

日期 Date	活動 Activities
17.5.2020	2020 年第二季攝影比賽及照片分享 (網上評分) 2020 2 nd Seasonal Photo Competition & Sharing Session
23.8.2020	2020 年第三季攝影比賽及照片分享 (網上評分) 2020 3 rd Seasonal Photo Competition & Sharing Session (Online rating)
22.11.2020	2020 年第四季攝影比賽及照片分享 (網上評分) 2020 4 th Seasonal Photo Competition & Sharing Session (Online rating)
21.2.2021	2021 年第一季攝影比賽及照片分享 (網上評分) 2021 1 st Seasonal Photo Competition & Sharing Session (Online rating)

Annual Best Photos of Year 2020 (Class A)



Champion
眾志成城



1st Runner-up
Heart at Lake



2nd Runner-up
天鵝湖

體育活動委員會 Sports Committee

陳厚毅醫生

Dr. CHAN Hau Ngai, Kingsley

葉永玉醫生

Dr. IP Wing Yuk

楊協和醫生

Dr. YEUNG Hip Wo, Victor

鑑於 2019 冠狀病毒疫情下的各項社交距離措施，二零二零至二零二一年度多個運動項目都未能舉行。但我們的“運動員”仍然堅持透過自我的訓練及練習繼續保持水準。

Most of the sports activities cannot be organized in Year 2019-2020 due to the social distancing measures under COVID-19 pandemic. However, our sportsmen and sports-ladies still practicing self-training to maintain their performance.

在此希望在疫情過後，我們能聚首一堂，互相切磋技能，增進友誼，期望有更多的年青醫生、醫科學生參與各類型比賽，讓醫學界的體育精神繼續燃燒，薪火相傳。

In the future, we hope to organized more activities for our sportsmen and sports-ladies to sharpen their skills and have exchange with friends and teammates. We would also like to see more young doctors and medical students joining our team. Let's thrive for the excellence in sports events.

常設委員會主席報告

Reports from Chairmen of Standing Committees

青年委員會 Youth Committee

陳子泰醫生
Dr. CHAN Tsz Tai

冼佩儀醫生
Dr. SIN Pui Yee, Helena

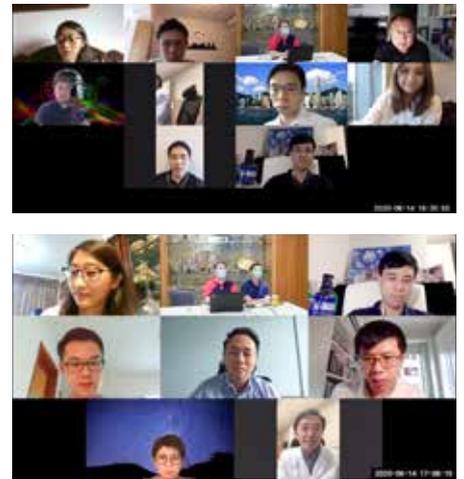
楊協和醫生
Dr. YEUNG Hip Wo, Victor

鑑於 2019 冠狀病毒疫情下的各項社交距離措施，所有於 2020-2021 年度舉行的活動都以網上形式舉行。委員會首個「網上職業講座」成功吸引近 280 位醫科學生出席。委員會亦邀請了不同範疇的講者與會員作經驗分享。而委員會轄下的醫學生附屬委員會亦舉辦了一系列網上醫學知識講座。

我們樂見有更多青年醫生和醫學生加入我們的活動！

In view of the social distancing measures under COVID-19 pandemic, most of the activities went virtual in 2020 and 2021. The first-ever virtual Career Seminar organized to our student members for career planning successfully attracted around 280 medical students. Distinguished speakers were invited to share their experience on the popular topics with our members via Zoom. The Medical Student Subcommittee (MSS) also organized some virtual workshops to enhance the clinic skills of student members.

Young doctors and medical students are most welcome to join our activities in the future!



活動一覽 Activities at a Glance

日期 Date	活動 Activities
14.6.2020	網上職業講座 2020 Career Seminar via Zoom 2020
25.10.2020	網上教育講座 Education Talk via Zoom
11.12.2020	網上財政管理講座 Asset Management Talk via Zoom
28.3.2021	“親職”技巧網上講座 Parenting Talk via Zoom
2-3.2021	臨床技巧網上講座 Clinical Skills Enhancement via Zoom

專責委員會主席報告

Reports from Chairmen of Ad-hoc Committees

香港醫學會百周年會慶籌備委員會 Organizing Committee on the HKMA 100th Anniversary Celebration

鄭志文醫生

Dr. CHENG Chi Man

二零二零年是香港醫學會百周年會慶的日子。由於疫情持續，我們只好無奈取消大部分計劃已久的慶祝活動。

然而，我們製作了一本百周年紀念特刊，收集了政府官員、本地及海外醫學界同儕，和其他專業團體的賀詞和勉勵。多位前會長在書中分享了本會在過去一世紀的重要里程碑，並提醒我們醫學會前人不遺餘力，為香港醫學會在醫學界奠下舉足輕重的領導角色。

二零二一年五月二十六日，本會在中環會所舉行百周年紀念特刊發布會。四屆會長蔡堅醫生聯同幾位前會長，包括梁智鴻醫生、方津生醫生和何仲平醫生，為大家回顧他們任內的工作重點及炙手議題。

歡迎會員向秘書處索取百周年紀念特刊，亦可瀏覽本會網站 www.hkma.org 上的電子版本。

除此以外，我們亦訂製了全新的百周年領帶及絲巾。有興趣的會員請瀏覽下列網頁了解詳情及訂購 <https://www.thkma.org/souvenirs.html>。



香港醫學會將謹守我們的使命和天職，在未來的日子繼續維護民康！

楊協和醫生

Dr. YEUNG Hip Wo, Victor



The Hong Kong Medical Association (HKMA) turned 100 years old in 2020. However, most of the planned celebratory events were cancelled due to the COVID-19 epidemic.

Despite, we have published a commemorative booklet gathering words of congratulation and encouragement from the Government officials, the local medical fraternity and worldwide, and other professions. Our past presidents wrote about the milestones in the HKMA's history and reminded us the grounding work of our forerunners that set the leading role of the Association.

On 26 May 2021, a book launch cum media reception was held at the HKMA Central Premises.

Four-term President Dr. CHOI Kin, together with other Past Presidents Dr. LEONG Che Hung, Dr. David FANG and Dr. HO Chung Ping gave a fascinating reminiscence of the major issues during their presidency.

Members are welcome to collect a copy of the publication from the Secretariat, or browse on-line at the HKMA website www.hkma.org.

Besides, we are much delighted to present you the new association ties and scarf to commemorate the centenary. Interested members please visit <https://www.thkma.org/souvenirs.html> for details and placing orders.

Holding fast to our mission, the HKMA will continue to safeguard the health of the Hong Kong people for many years to come!

專責委員會主席報告

Reports from Chairmen of Ad-hoc Committees

公私營協作計劃專責委員會 Task Force on Public Private Partnership

陳以誠醫生

Dr. CHAN Yee Shing, Alvin

鄭志文醫生

Dr. CHENG Chi Man

麥肇敬醫生

Dr. MAK Siu King

委員會於年內與醫院管理局（醫管局）舉行共三次網上會議。於八月七日及九月十六日的會議中，討論不同公私營協作計劃的可行方案。另於十一月十七日的會議中，討論冬季流感高峰期間的措施安排。我們在會議上提出因個人防護裝備的供應量不足，不少普通科醫生不會提供流感快速診斷測試。因此，委員會代表在會議上提議為免增加醫管局的普通科門診和急症室的壓力，希望可向每位參與計劃的病人增加多一個額外的附加藥物（特敏福），該意見得到醫管局承諾會考慮有關方案。

本會及醫管局於二零二零年十二月五日合辦了為時半日的網上「情緒病研討會」。醫管局的李永堅醫生及吳文建醫生分別於研討會上介紹醫管局轄下的精神健康診所，以及醫管局精神科專科門診現時對常見精神病患者的需要所作的照顧和跟進。而私人執業醫生林美玲醫生及莊勁怡醫生分別講述兒童和青少年常見的行為及情緒問題以及對以家庭為本之精神問題的靈性照顧。

在小組討論環節，四位講者分享他們對本會及醫管局計劃日後舉辦的情緒病進修課程模式、和醫管局情緒病個案的性質的見解，並探討普通科醫生 / 私營市場的醫生是否準備好參與情緒病公私營協作計劃。

The Task Force had three online meetings with the Hospital Authority (HA) during the year. The possible approaches for various PPP programmes were discussed during the meetings on 7 August and 16 September. While on 17 November, the arrangement on enhance measure for winter surge was discussed. We proposed and suggested to HA that there was reducing number of general practitioners providing Rapid Influenza Diagnostic Test (RIDT) to patients due to insufficient of personal protective equipment, in which might increase the demand from patients for RIDT in HA's GOPC or A&E. HA committed to consider the Advisory Group suggestions on the arrangement on enhanced measures during the winter surge in 2020-21 by adding an extra medication (Tamiflu) for each participating patient.

The HKMA and HA co-organized a half-day "Symposium on Mood Disorders" through online platform on 5 December 2020. Dr. LEE Wing King and Dr. NG Man Kin, Roger from HA introduced Common Mental Disorder Clinic (CMDC) model in HA and current pathways of care and needs of patients with common mental disorders in HA Psychiatric SOPC respectively. While Dr. LAM Mei Ling, May and Dr. CHONG King Yee, private practitioners, presented on common behavioral and mood problems in child and adolescents and holistic care for psychiatric conditions in family context.

During the panel discussion, the aforesaid speakers shared their views on the format of the potential structured Refresher Course on Mood Disorders to be jointly organized by the HKMA and HA in the future, cases nature of psychiatric cases in HA and the readiness of general practitioners/doctors in private sector in joining the potential Mood Disorder PPP.



其他組織及專業團體代表報告

Reports from HKMA Representatives on Non-Statutory Borad/Councils/ Professional Organizations

香港義務工作議會 Hong Kong Council of Volunteering

陳以誠醫生

Dr. CHAN Yee Shing, Alvin

義務工作發展局於二零二一年三月二十六日假香港會議展覽中心舉辦「二零二零年度傑出義工嘉許禮暨義務工作發展局主題曲發佈」，本會代表出席該嘉許禮。



On 26 March 2021, the Agency for Volunteer Service has organized the “Outstanding Volunteer Recognition 2020 cum AVS Theme Song Launching Ceremony” at the Hong Kong Convention and Exhibition Centre. Representative of the HKMA attended the ceremony.



職業安全健康局 — 醫護服務業安全及健康委員會

Occupational Safety and Health Council – Health Care Service Safety and Health Committee

梁子超醫生

Dr. LEUNG Chi Chiu

醫護服務業安全及健康委員會於一九九七年由職業安全健康局成立，致力推廣醫護人員的職業安全及健康。香港醫學會獲邀委派一名代表參與委員會，而主席則由各委員推選。委員會每年均舉辦不同活動，向醫護服務界推廣各項職業安全措施。委員會於二零二零年至二零二一年度製作了醫護服務業職安健二零二一年記事簿分派予不同界別之醫護人員。為宣傳職業安全及健康，以酒精潔手噴霧代替二零一九至二零二零年的 RFID 卡套連放大鏡。委員會以網上形式舉辦了三場講座，第一場講座主題為「預防工作間流感」網上講座，於二零二零年十月十九日舉行，出席人數為 176 人。第二場主題為「院舍從業員之扶抱技巧」網上講座，於二零二一年一月二十九日舉行，出席人數為 597 人。第三場主題為「工作壓力管理」講座，於二零二一年二月二十三日舉行，出席人數為 578 人。本年度共派發了兩期有關「預防暴力事故」和「工作間預防季節性流感」的醫護服務業安全及健康通訊。本會亦分發了印有職安健訊息的揮春以推廣職安健各方面的訊息。

The Health Care Service Safety and Health Committee was set up in 1997 by the Occupational Safety and Health Council to promote the occupational safety and health of health care workers in Hong Kong. One representative from HKMA was invited to sit in the Committee and the Chairman was elected among the members. Various promotion activities were organized each year to promote safe occupational practices within the health care sector. In 2020 - 2021, a 2021 diary with safety messages was produced and distributed to health care workers in various sectors. To promote occupational safety and health, an alcohol hand spray printed with occupational safety and health messages was designed and distributed instead of an RFID card holder cum lens in 2019 - 2020. Three seminars were held at online. The first one on “Prevention of Influenza in Workplace” was held on 19 October 2020 and attended by 176 participants; the second one on “Safe and Proper Lifting Techniques” was held on 29 January 2021 and attended by 597 participants; the third one on “Work Stress Management” was held on 23 February 2021 and attended by 578 participants. Two occupational safety and health bulletins were distributed, focusing on “Preventing Influenza at Workplace” and “Preventing Violence”. Fai chun printed with occupational safety and health messages were also distributed to promote various aspects of occupational safety and health.

香港醫學會慈善基金 The HKMA Charitable Foundation

林哲玄醫生

Dr. LAM Tzit Yuen, David

年度慈善音樂會

因疫情關係，原於二零二零年舉行的慈善音樂會需延期，直至另行通知。執行委員會於同年十一月開會決定，疫情過後舉行的慈善活動，將繼續為早前選定的受惠機構「兒童家居呼吸支援會」籌款。

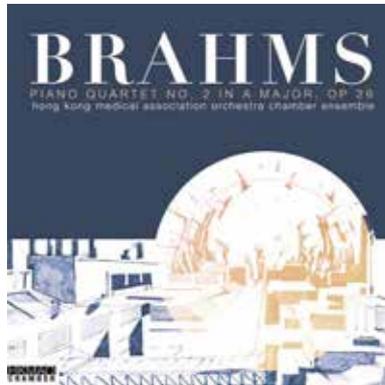
Annual Charity Concert

Due COVID-19 pandemic, the Annual Charity Concert scheduled for 2020 has to be postponed indefinitely. The Executive Committee met in November 2020 and agreed that the selected beneficiary, Paediatric Home Respiratory Support Society, should remain to be the beneficiary of our future annual charity event after resuming normal order.



慈善音樂光碟

香港醫學會管弦樂團室樂團製作了一隻 **Brahms's Piano Quartet No.2 in A Major, Op. 26** 的音樂光碟，作慈善用途。樂曲由幾位才華洋溢，獲獎無數的醫學生彈奏，並於香港大學百周年校園李兆基會議中心大會堂錄製。音樂光碟的收益，將撥捐醫學會慈善基金，會員可於醫學會秘書處以 \$120 購買，以支持這項善舉。



Charity CD

The Hong Kong Medical Association Orchestra Chamber Ensemble has produced a charity recording of **Brahms's Piano Quartet No. 2 in A Major, Op. 26**. The piece was played by multi-award winning, musically talented medical students and recorded in high quality at the HKU Centennial campus Grand Hall. All proceeds of the CD sales will go to HKMA Charitable Foundation. Members can get a copy at \$120 each from the HKMA Secretariat to support the charity cause.

環保工作報告

Environmental Report

目標與政策

本會在推行各項外務及內務工作時，均考慮有關決定對生態環境的影響，保持對環境負責的態度。本會現正推行的綠色管理政策包括：

1. 有效運用能源
2. 減少耗用紙張
3. 盡量使用可循環再用之物料
4. 推行綠色會所
5. 鼓勵使用公共交通工具
6. 提高員工環保意識
7. 支持綠色採購，並在合適情況下採用最可行的環保技術，保護天然資源

現行環保措施

有效運用能源

為了致力節約能源，本會秘書處員工均自律地減少用電，例如於毋須使用時關掉電燈及冷氣機。秘書處使用的空調系統具有一級能源效益標籤，善用地球資源。

減少耗用紙張

為了向公眾傳達健康訊息及增加與會員的溝通，本會必須定時印刷宣傳品及會訊，然而我們亦實行以下措施，以求減少耗紙量：

- 鼓勵使用電子郵件作溝通媒介
- 本會大部份刊物及會員資訊均已刊於本會網頁或面書專頁供會員查閱
- 縮減印刷宣傳品之印刷數量及大小
- 雙面使用紙張，以免浪費
- 收集辦公室廢紙，並交往廢紙收集站回收

使用可循環再用物料

本會盡量選用耐用的物料製作戶外推廣活動的物品，確保可以循環再用。同時，本會鼓勵活動參加者自攜水樽，減少購買及使用樽裝水。

推行綠色會所

本會兩所會所餐廳均安裝了隔油池，分隔日常運作所產生的廢水中之油污。外賣用之餐盒可重用及回收。疫情期間，會所在限聚令下暫時停業，本會鼓勵員工自攜可重用器皿盛載午餐。

提高員工環保意識

秘書處定時提醒員工遵守有關環保措施。

在合適情況下，採用最可行的環保技術，保護天然資源

新設電子會員卡，減少製造塑膠實體卡。

整體表現

相對去年，印刷及文具開支再下調 18%，水電開支更大幅減少 52%。

醫學會秘書處將繼續實行各項環保措施，為保護環境出一分力。

Aim and Strategy

The aim of the Association is to devise internal and external strategies to promote a sense of responsibility regarding the protection of the environment. In order to achieve its target, the Association has adopted the following environmentally friendly policies:

1. Enhance the efficiency of energy consumption
2. Decrease the consumption of paper
3. Use of re-cycled material whenever possible
4. Promote environmentally friendly clubhouses
5. Encourage the use of public transport
6. Enhance staff awareness on environmental protection issues
7. Embrace green purchasing practices and adopt best practicable technologies to conserve natural resources where applicable

The Implemented Environmental Protection Strategies

Enhance the efficiency of energy consumption

The Secretariat continues to save energy by ensuring that staff have developed a habit of switching off light and air conditioning immediately after use. Air conditioning systems with Grade 1 energy label were used to ensure efficient use of energy.

Decrease Consumption of Paper

Despite printing of promotional material to promote health messages to the public and regular newsletters and bulletins for communication to members, the following ways and means are applied to decrease the consumption of paper:

- Encourage the use of electronic media as the primary means of communication;
- Put up information on our Association's website and Facebook Page for reference;
- Decrease the size and number of printed materials and brochures;
- Print double-sided to reduce paper usage;
- Scan archive documents and save the blank pages as re-cycled printing papers;
- Collect and transport all used papers to waste paper collection point for recycling;

Use of re-cycled material

The Association strives to use durable and practicable material for outdoor promotional activities whenever possible to ensure that these materials could be used repeatedly. Also, participants of Association activities are encouraged to bring their own drinking bottles to reduce consumption of bottled water.

Promote environmentally friendly clubhouses

Grease trap treatment systems are equipped at both clubhouse restaurants to separate oil and grease in wastewater arising from normal operations of restaurants and food processing. Reusable and recyclable containers are used for takeaways. Staff were encouraged to bring their own reusable container for lunch when restaurants were closed under social distancing policy.

Enhance staff awareness on environmental protection issues

The Association reminds staff regularly on the various environmental protection policies.

Adopt best practicable technologies to conserve natural resources where applicable

Introduction of e-membership card to reduce production of plastic membership card.

Outcome

Compare with previous year, printing and stationery expenses were reduced by 18%, and water and electricity cost lowered by 52%.

The Association shall continue to promote the various environmental protection policies in the future.

里程碑 Milestones



14 June
Career Seminar via ZOOM 2020



27 August
Press conference on
HKMA Advices on COVID-19 and
the Universal Community
Testing Programme



23 June
HKMA Council Election Forum

June
2020

July
2020

August
2020

17 July
Annual General
Meeting



23 July
Press conference on
Combating the 3rd wave
of COVID-19





6 November
 Press conference on HKMA Opinions on Influenza Vaccination and Control Measures for Covid-19



10 February
 Press Conference on COVID-19 Vaccination and Doctor Manpower



16 November
 Men's Health Week

November 2020

December 2020

February 2021

May 2021



12 December
 老友記健康大學 - 同步過冬賀聖誕

12 May
 HKMA Responds to the Call of Vaccination



26 May
 Launching of the HKMA 100th Anniversary Commemorative Publication cum Media Reception



附錄 A – 各項委任

Appendix A – Appointments for the Year

香港醫學會各委員會成員名單 (二零二零至二零二一) HKMA Committees and Members (2020 - 2021)

I. 常設委員會

Standing Committees

1. 傳染病顧問委員會 Advisory Committee on Communicable Diseases

主席 Chairman			
Dr. CHAN Tsz Tai	陳子泰醫生	Dr. TSANG Kay Yan	曾祈殷醫生
Dr. CHAN Yee Shing, Alvin	陳以誠醫生		
成員 Members			
Prof. CHAN Kay Sheung, Paul	陳基湘教授	Dr. PANG Hok Tuen	彭學端醫生
Dr. CHUANG Wai Man, Vivien	莊慧敏醫生	Prof. Dirk U. PFEIFFER	
Prof. Benjamin John COWLING		Dr. SETO Wing Hong	司徒永康醫生
Dr. HO Hok Kung, Marco	何學工醫生	Dr. SO Man Kit, Thomas	蘇文傑醫生
Dr. HO King Man	何景文醫生	Dr. Siddharth SRIDHAR	
Prof. HUNG Fan Ngai, Ivan	孔繁毅教授	Dr. TSANG Tak Yin, Owen	曾德賢醫生
Prof. KWAN Kai Cho, Joseph	關繼祖博士	Dr. WONG Kai Hay, Howard	王啟熙獸醫
Dr. KWAN Yat Wah, Mike	關日華醫生	Dr. WU Ka Lun, Alan	胡家倫醫生
Dr. LAI Kang Yiu	黎鏡堯醫生	Dr. WU Tak Chiu	胡德超醫生
Dr. LAI Sik To	黎錫滔醫生	Dr. YAU Yat Sun	游日新醫生
Prof. LAM Tai Hing	林大慶教授	Prof. YU Chung Toi, Samuel	俞宗岱博士
Prof. LUI Chung Yan, Grace	雷頌恩教授		

2. 周年晚會籌備委員會 Annual Ball Committee

聯席主席 Co-Chairmen			
Dr. CHAN Nim Tak, Douglas	陳念德醫生	Dr. YEUNG Hip Wo, Victor	楊協和醫生
成員 Members			
Dr. CHAN Hau Ngai, Kingsley	陳厚毅醫生	Dr. LUK Yiu, Shiobhon	陸 嬌醫生
Dr. CHAN Yee Shing, Alvin	陳以誠醫生	Dr. MOK Chui Yuk, Jennifer	莫翠玉醫生
Dr. CHAN Yik Chun, Johnny	陳亦俊醫生	Dr. PONG Chiu Fai, Jeffrey	龐朝輝醫生
Dr. IP Wing Yuk, Josephine	葉永玉醫生	Dr. TSE Tak Yin, Cyrus	謝得言醫生
Dr. LOO King Fan, Steven	盧景勳醫生	Dr. Yam Chun Yin, Abraham	任俊彥醫生

3. 合唱團委員會 Choir Committee

聯席主席 Co-Chairperson		Social Convener	
Dr. CHONG King Yee	莊勁怡醫生	Dr. CHAN Yick Chun, Johnny	陳亦俊醫生
聯席主席 Co-Chairperson & External Liaison		Ex-official	
Dr. YEUNG Hip Wo, Victor	楊協和醫生	Dr. NG Yin Ming	吳彥明醫生
副主席 Vice-Chairperson		Committee Members	
Dr. LAW Yun Pui, Jessica	羅欣瑛醫生	Dr. AU Tat Yan	歐達仁醫生
Hon. Secretary & Treasurer		Dr. CHU Yip	朱 晔醫生
Dr. LEE Wai Tsun	李惠真醫生	Dr. KWOK Siu Kong	郭紹江醫生
IT			
Dr. TSUI Sin Yui, Cindy	徐倩蕊醫生		

4. 生命晚期治療委員會 Committee on End of Life Care

主席 Chairman			
Dr. SHEA Tat Ming, Paul	余達明醫生		
成員 Members			
Dr. CHOW Yin Man, Amy	周燕雯博士	Dr. LAM Po Tin	林寶鈿醫生
Dr. CHU Wai Ching, Welgent	朱偉正醫生	Dr. WONG Yee Him	黃以謙醫生
Dr. Elsie HUI	許鵬思醫生	Dr. YUEN Kwan Yuk, Jacqueline	阮君毓醫生
Dr. KWOK Oi Ling, Annie	郭愛玲醫生		

5. 推廣器官捐贈委員會 Committee on Organ Donation Promotion

聯席主席 Co-Chairmen			
Dr. CHAN Siu Kim	陳小劍醫生	Dr. YEUNG Hip Wo, Victor	楊協和醫生
Dr. MAK Siu King	麥肇敬醫生		
成員 Members			
Dr. CHAN Nim Tak, Douglas	陳念德醫生	Dr. HO Yue Cheung	何汝祥醫生
Dr. CHAN Yee Shing, Alvin	陳以誠醫生	Dr. LAU Chung Hang, Kevin	劉仲恆醫生
Dr. CHOI Kin	蔡 堅醫生	Dr. SIU Yui Pong, Gordon	蕭睿邦醫生
Dr. CHENG Man Yung	鄭文容醫生	Dr. WONG Yee Him	黃以謙醫生
Dr. FUNG Tak Kwan, James	馮德焜醫生		

6. 病人組織聯絡委員會 Committee on Relationship with Patient Organizations

聯席主席 Co-Chairmen			
Dr. CHAN Tin Sang, Augustine	覃天笙醫生	Dr. CHAN Yee Shing, Alvin	陳以誠醫生
Dr. CHAN Tsz Tai	陳子泰醫生		
成員 Members			
Dr. Hon CHAN, Pierre	陳沛然醫生	Dr. LEE Kong Ngai, Paul	李罡毅醫生
Dr. CHENG Chi Man	鄭志文醫生	Dr. SIN Kin Man, Johnson	冼建文醫生
Dr. IP Wing Yuk, Josephine	葉永玉醫生	Dr. SIN Pui Yee, Helena	冼佩儀醫生
Dr. LAM Mei Ling, May	林美玲醫生	Dr. YEUNG Hip Wo, Victor	楊協和醫生
Dr. LEE Fook Kay, Aaron	李福基醫生		

7. 香港醫學會社區網絡中央協調工作小組 The HKMA Community Network - Central Coordination Committee

中央聯絡人 Central Co-ordinators

Dr. CHAN Yee Shing, Alvin	陳以誠醫生	Dr. MAK Siu King	麥肇敬醫生
Dr. CHENG Chi Man	鄭志文醫生		

分區聯絡人 District Co-ordinators

港島中西南區 Central, Western & Southern

主席 Chairman	
Dr. YIK Ping Yin, Simon	易秉賢醫生
副主席 Vice-Chairmen	
Dr. CHAN Hau Ngai, Kingsley	陳厚毅醫生
Dr. LAW Yim Kwai	羅炎達醫生
義務秘書 Honorary Secretary	
Dr. POON Man Kay	潘文基醫生
義務司庫 Honorary Treasurer	
Dr. TSANG Chun Au	曾振鏞醫生
義務顧問 Honorary Advisor	
Dr. YU Cissy	余詩思醫生
成員 Members	
Dr. LAU Chung Hang, Kevin	劉仲恒醫生
Dr. TSANG Kin Lun	曾建倫醫生
Dr. TSE Tak Yin, Cyrus	謝得言醫生

港島東 Hong Kong East

主席 Chairman	
Dr. CHAN Nim Tak, Douglas	陳念德醫生
外務副主席 Vice-Chairman, Exterior	
Dr. YOUNG Ying Nam, Dominic	楊應南醫生
內務副主席 Vice-Chairman, Interior	
Dr. YIP Yuk Pang, Kenneth	葉玉鵬醫生
義務秘書 Honorary Secretary	
Dr. KONG Wing Ming, Henry	江永明醫生
義務司庫 Honorary Treasurer	
Dr. NGAN Sze Yuen, Silas	顏思遠醫生
前任主席 Immediate Past Chairman	
Dr. WONG Bun Lap, Bernard	黃品立醫生
義務顧問 Honorary Advisors	
Dr. CHIU Shing Ping, James	趙承平醫生
Dr. Beatrice CHENG	鄭信恩醫生
Dr. LUK Che Chung	陸志聰醫生
成員 Members	
Dr. AU Chi Lap, Simon	區志立醫生
Dr. CHAN Hoi Chung, Samuel	陳海聰醫生
Dr. CHAN Kar Kong, Denny	陳嘉康醫生
Dr. GOH Kim Yeow, Joseph	吳金耀醫生
Dr. HO Hung Kwong, Duncan	何鴻光醫生
Dr. LAM See Yui, Joseph	林思睿醫生
Dr. LEUNG Kwan Kui, Terence	梁均鉅醫生
Dr. LI Keung	李強醫生
Dr. MA Pui Shan	馬珮珊醫生
Dr. NG Wing Fai, Bruce	黃榮輝醫生
Dr. PANG Bor	彭波醫生
Dr. TUET On Sang	脫安生醫生
Dr. WONG Chun Por	王春波醫生
Dr. WONG Pak Hoi	黃柏海醫生
Dr. WONG Yu Fai	黃宇暉醫生
Dr. WONG, Michelle	黃敏瑩醫生

九龍城 Kowloon City

分區聯絡人 District Coordinators

Dr. CHAN Man Chung	陳文仲醫生
Dr. CHIN Chu Wah	錢柱華醫生

九龍東 Kowloon East

主席 Chairman	
Dr. AU Ka Kui, Gary	區家駒醫生
副主席 Vice-Chairman	
Dr. MA Ping Kwan, Danny	馬炳坤醫生
義務秘書 Honorary Secretary	
Dr. CHU Wen Jing, Jennifer	朱蘊晶醫生
義務司庫 Honorary Treasurer	
Dr. LEUNG Wing Hong	梁永康醫生
成員 Members	
Dr. CHAN Yuk Chi	陳毓志醫生
Dr. CHENG Kin Keung, William	鄭健強醫生
Dr. CHUNG King Keung	鍾景強醫生

九龍東 Kowloon East

Dr. LEUNG Kwong Ming	梁廣明醫生
Dr. LI Kwok Leung	李國樑醫生
Dr. MA Yee Chung, Julian	馬宜聰醫生
Dr. SHIU Ka Lok, Ivan	蕭家樂醫生
Dr. TAI Ming Tung	戴明東醫生
Dr. TING Ka Chu	丁家柱醫生
Dr. WONG Sheung Fan	王雙芬醫生

九龍西 Kowloon West

主席 Chairman	
Dr. TONG Kai Sing	唐繼昇醫生
副主席 Vice-Chairman	
Dr. CHAN Siu Man, Bernard	陳小敏醫生
義務司庫 Honorary Treasurer	
Dr. LEUNG Gin Pang	梁展鵬醫生
成員 Members	
Dr. LAM Ngam, Raymond	林岩醫生
Dr. LAW Chun Bon, Alexander	羅振邦醫生
Dr. LEUNG Kin Nin, Kenneth	梁健年醫生
Dr. MOK Kwan Yeung, Matthew	莫昆洋醫生
Dr. WONG Yiu Wah	黃耀華醫生

男士健康社區網絡 Men's Health Community Network

聯席主席 Co-Chairmen

Dr. CHAN Yee Shing, Alvin	陳以誠醫生
Dr. CHENG Chi Man	鄭志文醫生
Dr. MAK Siu King	麥肇敬醫生

成員 Members

Dr. CHAN Fu	陳虎醫生
Dr. CHAN Hau Ngai, Kingsley	陳厚毅醫生
Dr. CHAN Nim Tak, Douglas	陳念德醫生
Dr. CHAN Tsz Tai	陳子泰醫生
Dr. CHENG Kwun Chung, Bryan	鄭冠中醫生
Dr. CHIU Chi Fai, Billy	趙志輝醫生
Dr. CHO Chak Lam	曹澤霖醫生
Dr. CHONG King Yee	莊勁怡醫生
Dr. CHUNG Chor Yat, Stephen	鍾礎逸醫生
Dr. KONG Wing Ming, Henry	江永明醫生
Dr. LAM Pei Wayne	林沛泓醫生
Dr. LAU Yip Kwong, Francis	劉業光醫生
Dr. LAU Kar Wai, Gary	劉家偉醫生
Dr. MAK Kai Lok, Gregory	麥榮諾醫生
Dr. ROSS, Grant Neil	
Dr. TONG Kai Sing	唐繼昇醫生
Dr. TSE Tak Sun, Samson	謝德新醫生
Dr. TSOI Chun Hing, Ludwig	蔡振興醫生
Dr. TUNG Siu Ying, Margaret	董小英醫生
Dr. WONG Ping Hong, Derek	黃秉康醫生
Dr. WONG Tak Man	黃德民醫生
Dr. WONG Tin Yau, Andrew	黃天祐醫生
Dr. YAM Chun Yin, Abraham	任俊彥醫生
Dr. YEUNG Hip Wo, Victor	楊協和醫生

新界西 New Territories West

(Tin Shui Wai 天水圍 / Tuen Mun 屯門 / Yuen Long 元朗)

主席 Chairman

Dr. CHEUNG Kwok Wai, Alvin	張國威醫生
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副主席 Vice-Chairman

Dr. TSUI Fung	徐豐醫生
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義務秘書 Honorary Secretary

Dr. TSANG Yat Fai	曾日暉醫生
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義務司庫 Honorary Treasurer

Dr. CHAN Lam Fung, Lambert	陳嵐峰醫生
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成員 Members

Dr. CHAN Siu Chung	陳兆聰醫生
Dr. LEE Shin Cheung	李善章醫生
Dr. PANG Lai Sheung	彭麗嫦醫生
Dr. SIU Yui Pong, Gordon	蕭睿邦醫生
Dr. WONG Yu Man, James	王裕民醫生

附錄 A – 各項委任

Appendix A – Appointments for the Year

沙田 Shatin

主席 Chairman
Dr. MAK Siu King 麥肇敬醫生

大埔 Tai Po

主席 Chairman
Dr. CHIU Sik Ho, Bonba 趙錫河醫生
副主席 Vice-Chairmen
Dr. LI Shan Ho 李山河醫生
Dr. PANG Kam Keung 彭錦強醫生
義務秘書 Honorary Secretary
Dr. LAU Sai Lai 劉世禮醫生
義務司庫 Honorary Treasurer
Dr. HUANG Hsin Yang 黃琛仰醫生
義務顧問 Honorary Advisors
Dr. CHOW Chun Kwan, John 周振軍醫生
Dr. FUNG Hong 馮康醫生
Dr. YU Kwan, Alexander 於群醫生
成員 Members
Dr. CHAN Kin Hing 陳建慶醫生
Dr. CHEUNG Wai Ching 張偉政醫生
Dr. LEE Chok Huen, Alex 李作炬醫生
Dr. WU Siu Wan, Kelvin 胡兆雲醫生

油尖旺 Yau Tsim Mong

主席 Chairman
Dr. CHENG Kai Chi, Thomas 鄭繼志醫生
副主席 Vice-Chairman
Dr. HO Hok Ming 賀鶴鳴醫生
義務秘書 Honorary Secretary
Dr. HO Lap Yin 何立言醫生
義務司庫 Honorary Treasurer
Dr. LEE Wai Lun 李偉倫醫生
義務顧問 Honorary Advisor
Dr. LAM Tzit Yuen, David 林哲玄醫生
成員 Members
Dr. CHAN Ching Pong 陳靖邦醫生
Dr. CHAN Ka Wing, Joseph 陳嘉榮醫生
Dr. CHAN Wai Keung, Ricky 陳偉強醫生
Dr. CHAN Wai Kwong 陳偉光醫生
Dr. CHOI Siu Tong, Stanley 蔡兆堂醫生
Dr. FONG Chun Yan, Julian 方俊仁醫生
Dr. HO Fung 何峰醫生
Dr. HO Kit Man, Carmen 何潔雯醫生
Dr. LAM King Hei, Stanley 林敬熹醫生
Dr. LEUNG Chi Shan, Fiona 梁志珊醫生
Dr. LEUNG Wai Fung, Anders 梁維峰醫生
Dr. LI Fan Lan, Florence 李芬蘭醫生
Dr. WONG Kam Ho 黃金豪醫生
Dr. WONG Wing Kwong, Raymond 黃榮光醫生

8. 社區服務委員會 Community Service Committee

聯席主席 Co-Chairmen
Dr. CHAN Nim Tak, Douglas 陳念德醫生
Dr. TONG Kai Sing 唐繼昇醫生
副主席 Vice-Chairman
Dr. WONG Yee Him 黃以謙醫生
成員 Members
Dr. AU Yiu Kai 歐耀佳醫生
Dr. CHAN Kit Sheung 陳潔霜醫生
Dr. CHAN Yee Shing, Alvin 陳以誠醫生
Dr. CHENG Chi Man 鄭志文醫生
Dr. CHEUNG Hon Ming 張漢明醫生
Dr. CHOW Pak Chin 周伯展醫生
Dr. FUNG Tak Kwan, James 馮焜焜醫生
Dr. YEUNG Hip Wo, Victor 楊協和醫生
Dr. HO Chung Ping 何仲平醫生
Dr. IP Wing Yuk, Josephine 葉永玉醫生
Dr. LEUNG Chi Chiu 梁子超醫生
Dr. WONG Bun Lap, Bernard 黃品立醫生
Dr. YAM Chun Yin 任俊彥醫生
Dr. YEUNG Chiu Fat, Henry 楊超發醫生

8.1 「社居耆健醫學堂」小組委員會 Sub-Committee on Community Health Academy for Elderly

聯席主席 Co-Chairmen
Dr. CHAN Nim Tak, Douglas 陳念德醫生
Dr. TONG Kai Sing 唐繼昇醫生
成員 Members
Dr. CHAN Siu Man, Bernard 陳小敏醫生
Dr. LAM Ngam, Raymond 林若醫生
Dr. LAW Chun Bon, Alexander 羅振邦醫生
Dr. LEUNG Gin Pang 梁展鵬醫生
Dr. YEUNG Hip Wo, Victor 楊協和醫生
Dr. LEUNG Kin Nin, Kenneth 梁健年醫生
Dr. MOK Kwan Yeung, Matthew 莫昆洋醫生
Dr. WONG Yiu Wah 黃耀華醫生

9. 投訴及調解委員會 Complaints and Mediation Committee

聯席主席 Co-Chairmen
Dr. CHAN Siu Kim 陳小劍醫生
Dr. MAK Siu King 麥肇敬醫生
成員 Members
Dr. CHAN Nim Tak, Douglas 陳念德醫生
Dr. CHAN Yee Shing, Alvin 陳以誠醫生
Dr. CHIU Shing Ping, James 趙承平醫生
Dr. CHOO Kah Lin 俞佳琳醫生
Dr. DAI Lok Kwan, David 戴樂群醫生
Dr. LEE Fook Kay, Aaron 李福基醫生
Dr. WAI Ka Chung, Abraham 衛家聰醫生
Dr. WONG Shou Pang, Alexander 王壽鵬醫生
Dr. WONG Yam Hong, Alfred 黃任匡醫生
Dr. YEUNG Chiu Fat, Henry 楊超發醫生

10. 持續醫學進修委員會 Continuing Medical Education (CME) Committee

聯席主席 Co-Chairmen
Dr. CHENG Chi Man 鄭志文醫生
Dr. HO Hung Kwong, Duncan 何鴻光醫生
成員 Members
Dr. CHOI Kin 蔡堅醫生
Dr. WONG Bun Lap, Bernard 黃品立醫生
Dr. LAM Ho 林賀醫生
Dr. MAK Siu King 麥肇敬醫生
Dr. YEUNG Hip Wo, Victor 楊協和醫生

10.1 持續醫學進修評審委員會 CME Accreditation Sub-Committee

主席 Chairperson

Prof. YOUNG Tse Tse, Rosie

楊紫芝教授

成員 Members

Dr. CHOI Kin

蔡堅醫生

Dr. LAM Ho

林賀醫生

Dr. CHENG Chi Man

鄭志文醫生

Dr. LI Siu Lung, Steven

李少隆醫生

Dr. FOO Kam So, Stephen

傅鑑蘇醫生

Dr. MAK Siu King

麥肇敬醫生

Dr. HO Hung Kwong, Duncan

何鴻光醫生

Dr. YEUNG Hip Wo, Victor

楊協和醫生

10.2 持續醫學進修專訊及網上版編輯委員會 CME Bulletin & Online Editorial Board

聯席總編輯 Chief Editors

Dr. CHENG Chi Man

鄭志文醫生

Nephrology

陳文岩醫生

Dr. HO Hung Kwong, Duncan

何鴻光醫生

Dr. CHAN Man Kam

何仲平醫生

Dr. LAM Ho

林賀醫生

Dr. HO Kai Leung, Kelvin

何繼良醫生

Dr. MAK Siu King

麥肇敬醫生

Dr. LAM Man Fai

林萬斐醫生

Dr. WONG Bun Lap, Bernard

黃品立醫生

Dr. LEE Hoi Kan, Achilles

李海根醫生

Cardiology

Dr. CHAN Kit

陳杰醫生

Dr. FONG Chung Yan, Gardian

方頌恩醫生

Dr. CHEN Wai Hong

陳偉康醫生

Dr. TSANG Kin Lun, Alan

曾建倫醫生

Dr. LEE Pui Yin

李沛然醫生

Neurosurgery

陳秉漢醫生

Dr. LI Siu Lung, Steven

李少隆醫生

Dr. CHAN Ping Hon, Johnny

陳潔霜醫生

Dr. TAM Chou Cheung

譚礎璋醫生

Obstetrics and Gynaecology

梁展聰醫生

Dr. WONG Shou Pang, Alexander

王壽鵬醫生

Dr. CHAN Kit Sheung

龐朝輝醫生

Cardiothoracic Surgery

Dr. CHENG Lik Cheung

鄭力翔醫生

Ophthalmology

葉永玉醫生

Dr. CHIU Shui Wah, Clement

趙瑞華醫生

Dr. LIANG Chan Chung, Benedict

江金富醫生

Dr. CHUI Wing Hung

崔永雄醫生

Dr. POON Chiu Fai, Jeffrey

潘德鄰醫生

Dr. LEUNG Siu Man, John

梁兆文醫生

Orthopaedics and Traumatology

鄧耀楷醫生

Colorectal Surgery

Dr. CHAN Cheung Wah

陳長華醫生

Dr. IP Wing Yuk, Josephine

葉永玉醫生

Dr. LEE Yee Man

李綺雯醫生

Dr. KONG Kam Fu

江金富醫生

Dr. TSE Tak Yin, Cyrus

謝得言醫生

Dr. POON Tak Lun

潘德鄰醫生

Dermatology

Dr. CHAN Hau Ngai, Kingsley

陳厚毅醫生

Dr. TANG Yiu Kai

鄧耀楷醫生

Dr. HAU Kwun Cheung

侯鈞翔醫生

Paediatrics

陳以誠醫生

Endocrinology

Dr. LEE Ka Kui

李家駒醫生

Dr. CHAN Yee Shing, Alvin

陳以誠醫生

Dr. LO Kwok Wing, Matthew

盧國榮醫生

Dr. TSE Hung Hing

謝鴻興醫生

ENT

Dr. CHOW Chun Kuen

周振權醫生

Dr. YEUNG Chiu Fat, Henry

楊超發醫生

Family Medicine

Dr. LAM King Hei, Stanley

林敬熹醫生

Plastic Surgery

吳偉民醫生

Dr. LI Kwok Tung, Donald

李國棟醫生

Dr. NG Wai Man, Raymond

黎大森醫生

Gastroenterology

Dr. NG Fook Hong

吳福康醫生

Psychiatry

梁偉正醫生

General Practice

Dr. YAM Chun Yin, Abraham

任俊彥醫生

Dr. WONG Yee Him

黃以謙醫生

General Surgery

Dr. LAM Tzit Yuen, David

林哲玄醫生

Radiology

陳家發醫生

Dr. LEUNG Ka Lau

梁家驊醫生

Dr. CHAN Ka Fat, John

陳家發醫生

Geriatric Medicine

Dr. KONG Ming Hei, Bernard

江明熙醫生

Dr. CHAN Yip Fai, Ivan

陳業輝醫生

Haematology

Dr. SHEA Tat Ming, Paul

余達明醫生

Respiratory Medicine

梁子超醫生

Dr. AU Wing Yan

區永仁醫生

Dr. LEUNG Chi Chiu

黃家進醫生

Hepatobiliary Surgery

Dr. MAK Yiu Kwong, Vincent

麥耀光醫生

Dr. WONG Ka Chun

黃家進醫生

Medical Oncology

Dr. CHIK Hsia Ying, Barbara

戚夏穎醫生

Dr. WONG King Ying

黃琮英醫生

Dr. LIU Chi Leung

廖子良醫生

Dr. YUNG Wai Ming, Miranda

容慧明醫生

Dr. TSANG Wing Hang, Janice

曾詠恆醫生

Rheumatology

陳德顯醫生

Dr. CHEUNG Tak Cheong

張德昌醫生

Urology

Dr. CHEUNG Man Chiu

張文釗醫生

Dr. KWOK Ka Ki

郭家麒醫生

Dr. KWOK Tin Fook

郭天福醫生

Dr. YEUNG Hip Wo, Victor

楊協和醫生

Vascular Surgery

Dr. TSE Cheuk Wa, Chad

謝卓華醫生

10.3 持續醫學進修策劃委員會 CME Organizing Sub-Committee

主席 Chairman

Dr. CHENG Chi Man

鄭志文醫生

成員 Members

Dr. AU Yiu Kai

歐耀佳醫生

Dr. LAM Ho

林賀醫生

Dr. CHAN Yee Shing, Alvin

陳以誠醫生

Dr. LI Siu Lung, Steven

李少隆醫生

Dr. CHOI Kin

蔡堅醫生

Dr. MAK Siu King

麥肇敬醫生

Dr. HO Hung Kwong, Duncan

何鴻光醫生

Dr. YEUNG Hip Wo, Victor

楊協和醫生

附錄 A – 各項委任

Appendix A – Appointments for the Year

11. 醫務道德委員會 Ethics Committee

主席 Chairman			
Dr. CHOW Wing Sun	周榮新醫生	Dr. KEI Shiu Kong	紀紹綱醫生
Dr. HO Hung Kwong, Duncan	何鴻光醫生		
成員 Members			
Dr. CHAN Nim Tak, Douglas	陳念德醫生	Dr. LEE Fook Kay, Aaron	李福基醫生
Dr. CHAN Yee Shing, Alvin	陳以誠醫生	Dr. SHEA Tat Ming, Paul	佘達明醫生
Dr. CHIU Shing Ping, James	趙承平醫生	Dr. TSE Chun Yan	謝俊仁醫生
Dr. CHONG King Yee	莊勁怡醫生	Dr. WONG Shou Pang, Alexander	王壽鵬醫生
Dr. FUNG Tak Kwan, James	馮德焜醫生	Dr. YUEN Kar Ngai, Robert	阮嘉毅醫生
Dr. IP Wing Yuk, Josephine	葉永玉醫生	Dr. YEUNG Chiu Fat, Henry	楊超發醫生
Dr. MAK Siu King	麥肇敬醫生		

12. 財務委員會 Finance Committee

聯席主席 Co-Chairmen			
Dr. CHAN Tin Sang, Augustine	覃天笙醫生	Dr. YEUNG Hip Wo, Victor	楊協和醫生
成員 Members			
Dr. CHAN Nim Tak, Douglas	陳念德醫生	Dr. FUNG Tak Kwan, James	馮德焜醫生
Dr. CHAN Tsz Tai	陳子泰醫生	Dr. HO Hung Kwong, Duncan	何鴻光醫生
Dr. CHAN Yee Shing, Alvin	陳以誠醫生	Dr. KEI Shiu Kong	紀紹綱醫生
Dr. CHENG Chi Man	鄭志文醫生	Dr. LEE Fook Kay, Aaron	李福基醫生
Dr. CHOI Kin	蔡堅醫生	Dr. MAK Siu King	麥肇敬醫生

13. 健康教育委員會 Health Education Committee

聯席主席 Co-Chairpersons			
Dr. IP Wing Yuk, Josephine	葉永玉醫生	Dr. SO Yui Chi	蘇睿智醫生

14. 會所管理委員會 House Committee

主席 Chairperson			
Dr. IP Wing Yuk, Josephine	葉永玉醫生		
成員 Members			
Dr. HO Tze Kwan, Carmen	何紫筠醫生	Dr. WONG Shun Man, Irene	黃舜雯醫生
Dr. WONG Ling Yuen	黃令婉醫生		

15. 資訊科技委員會 Information Technology Committee

聯席主席 Co-Chairmen			
Dr. CHAN Tsz Tai	陳子泰醫生	Dr. MAK Siu King	麥肇敬醫生
成員 Members			
Dr. CHAN Shung Kay, Samuel	陳崇基醫生	Dr. LUI Man Hin	呂旻軒醫生
Dr. CHAN Tin Sang, Augustine	覃天笙醫生	Dr. MAK Hoi Kwan, Calvin	麥凱鈞醫生
Dr. CHU Ho Yin	朱浩賢醫生	Dr. WAI Man Wah, Andrew	韋文華醫生
Dr. LEE Fook Kay, Aaron	李福基醫生		

16. 國際事務委員會 International Affairs Committee

聯席主席 Co-Chairmen			
Dr. CHAN Tin Sang, Augustine	覃天笙醫生	Dr. CHAN Yee Shing, Alvin	陳以誠醫生
Dr. CHAN Tsz Tai	陳子泰醫生		
成員 Members			
Dr. AU YEUNG Kwok Leung	歐陽國樑醫生	Dr. LAM Mei Ling, May	林美玲醫生
Dr. CHEUNG Chin Pang	張展鵬醫生	Dr. Marcus MARCET	

17. 醫療保障計劃管理委員會 Management Committee on Medical Protection Scheme

聯席主席 Co-Chairmen			
Dr. CHENG Chi Man	鄭志文醫生	Dr. CHOI Kin	蔡堅醫生
成員 Members			
Dr. FUNG Tak Kwan, James	馮德焜醫生	Dr. YEUNG Hip Wo, Victor	楊協和醫生

18. 人力事務委員會 Manpower Committee

聯席主席 Co-Chairmen			
Dr. CHENG Chi Man	鄭志文醫生	Dr. CHOI Kin	蔡堅醫生
成員 Members			
Dr. FUNG Tak Kwan, James	馮德焜醫生	Dr. YEUNG Hip Wo, Victor	楊協和醫生

19. 會員服務委員會 Membership Services Committee

聯席主席 Co-Chairmen Dr. CHAN Hau Ngai, Kingsley 成員 Members Dr. AU Sui Man, Sherman Dr. CHAN Yee Shing, Alvin Dr. CHOI Kin Dr. LEE Fook Kay, Aaron Dr. LEE Kong Ngai, Paul	陳厚毅醫生 區瑞雯醫生 陳以誠醫生 蔡堅醫生 李福基醫生 李罡毅醫生	Dr. YEUNG Hip Wo, Victor Dr. SO Yui Chi Dr. TSE Hung Hing Dr. WONG Bun Lap, Bernard Dr. WONG Ming Ho, Edmond Mr. WU Tai Dong	楊協和醫生 蘇睿智醫生 謝鴻興醫生 黃品立醫生 王明皓醫生 吳泰東先生
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20. 國家事務委員會 National Affairs Committee

聯席主席 Co-Chairmen Dr. MAK Siu King 成員 Members Dr. CHU Yip Dr. FONG Cheong Yi Dr. KOO Hok Tin, Hilton Dr. KWOK Hiu Fung Dr. LAM Tzit Yuen, David Dr. LAM Wing Kai Dr. LAU Ka Man, Angela Dr. LEE Kong Ngai, Paul Dr. LEUNG Siu Foon	麥肇敬醫生 朱擘醫生 方暢怡醫生 古學滇醫生 郭曉楓醫生 林哲玄醫生 林永佳醫生 劉嘉雯醫生 李罡毅醫生 梁兆寬醫生	Dr. TONG Kai Sing Dr. LI Shiyue Dr. LI Sum Wo Dr. LUK Wai Sum Dr. TSE Sut Yee Dr. WONG Kiu Fung Dr. WONG Man Shun Dr. YEUNG Chi Fung Dr. YEUNG Kam Hing	唐繼昇醫生 李詩悅醫生 李深和醫生 陸慧心醫生 謝雪兒醫生 王喬峯醫生 王孟順醫生 楊志峰醫生 楊金慶醫生
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21. 會訊出版委員會 Newsletter Committee

編輯 Editor Dr. CHENG Chi Man 副編輯 Deputy Editor Dr. YEUNG Hip Wo, Victor 成員 Members Dr. CHAN Tin Sang, Augustine Dr. CHOW Wing Sun Dr. LEE Fook Kay, Aaron	鄭志文醫生 楊協和醫生 覃天笙醫生 周榮新醫生 李福基醫生	Dr. NG Chi Ho Dr. SO Yui Chi	吳志豪醫生 蘇睿智醫生
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22. 管弦樂團委員會 Orchestra Committee

聯席主席 Co-Chairmen Dr. CHAN Yee Shing, Alvin	陳以誠醫生	Dr. MAK Siu King	麥肇敬醫生
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23. 康樂及文化委員會 Recreational and Cultural Committee

主席 Chairperson Dr. SIN Pui Yee, Helena 成員 Members Dr. AU Yiu Kai Dr. CHAN Man Kam Dr. CHENG Chi Man Dr. CHEUNG Hon Ming Dr. CHIU Shing Ping, James Dr. FUNG Tak Kwan, James Dr. LAI Bing Man, Raymond Dr. LAM Pui Yan, Joyce Photographic Subcommittee Chairperson: Dr. PANG Lai Man, Amy Traditional Chinese Opera Subcommittee Chairman: Dr. WONG Shou Pang, Alexander	冼佩儀醫生 歐耀佳醫生 陳文岩醫生 鄭志文醫生 張漢明醫生 趙承平醫生 馮德焜醫生 黎炳民醫生 林沛欣醫生 彭麗雯醫生 王壽鵬醫生	Dr. LEUNG Kay Tai, Franky Dr. LEUNG Yu Lung, Dexter Dr. LI Sum Wo Dr. PANG Lai Man, Amy Dr. PHANG Shu Sum Dr. PONG Chiu Fai, Jeffrey Dr. WONG Shou Pang, Alexander Dr. YU, Cissy	梁基泰醫生 梁裕龍醫生 李深和醫生 彭麗雯醫生 彭樹森醫生 龐朝輝醫生 王壽鵬醫生 余詩思醫生
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附錄 A – 各項委任

Appendix A – Appointments for the Year

24. 體育活動委員會 Sports Committee

聯席隊長 Co-Sports Captains

Dr. CHAN Hau Ngai, Kingsley
Dr. IP Wing Yuk, Josephine

陳厚毅醫生
葉永玉醫生

Dr. YEUNG Hip Wo, Victor

楊協和醫生

Deputy Sports Captains 副隊長

Dr. IP Man Ho
Dr. SIN Pui Yee, Helena

葉文浩醫生
冼佩儀醫生

Dr. YEUNG Chun Chun, Jane

楊珍珍醫生

Advisers 顧問

Dr. CHAN Che Keung, Anthony
Dr. KWAN Man Woo

陳自強醫生
關文護醫生

Dr. TSE Hung Hing
Dr. YEUNG Chiu Fat, Henry

謝鴻興醫生
楊超發醫生

體育活動小組 Sports Subcommittees

羽毛球隊長 Badminton

Dr. WONG Ting Fung

王庭峰醫生

網球聯席隊長 Tennis

Dr. CHIN Chu Wah

錢柱華醫生

籃球聯席隊長 Basketball

Dr. BUT Yiu Kuen, David

畢耀權醫生

Dr. YU Kim Hun, Derek

於劍鏗醫生

橋牌隊長 Bridge

Dr. LAM Hon Shing

林漢城醫生

Dr. HUI Kin Leung, Edward

許堅樑醫生

單車隊長 Cycling

Dr. MAK Siu King

麥肇敬醫生

Dr. WONG Kwok Ho

黃國豪醫生

龍舟隊長 Dragon Boat (Men)

Dr. YAM Chun Yin, Abraham

任俊彥醫生

Dr. CHOW Yuen Hon, Francis

周源瀚醫生

龍舟隊長 Dragon Boat (Ladies)

Dr. CHENG Po Yi, Priscilla

鄭寶儀醫生

Dr. HUI Yat Ming, Johnson

許一鳴醫生

足球聯席隊長 Football

Dr. CHAN Chi Wing, Timmy

陳智榮醫生

Dr. CHOW Yuen Hon, Francis

葉文浩醫生

高爾夫球隊隊長 Golf

Dr. HOU Lee Tsun, Laurence

侯勵存醫生

Dr. CHOW Yuen Hon, Francis

吳翠蓮醫生

遠足活動聯絡人 Hiking Coordinator

Dr. SIN Pui Yee, Helena

冼佩儀醫生

Dr. NG Tsui Lin, Ada

余學而醫生

健力活動隊長 Power-lifting

Dr. IP Wing Yuk, Josephine

葉永玉醫生

Dr. YU Hok Yee, Harry

馮彥偉先生

航海隊長 Sailing

Dr. TSE Hung Hing

謝鴻興醫生

Dr. HUI Yat Ming, Johnson

許一鳴醫生

桌球隊長 Snooker

Dr. KUNG, Garry

龔敬然醫生

Mr. Fergus FUNG (CUHK)

馮彥偉先生

壁球隊長 Squash

Dr. HO Yiu Wah

何耀華醫生

Miss HUI Tsam Man (HKU)

許沁敏小姐

乒乓球聯席隊長 Table-Tennis

Dr. KOO Hok Tin, Hilton

古學滇醫生

Dr. YEUNG Hip Wo, Victor

楊協和醫生

Dr. YEUNG Hip Wo, Victor

楊協和醫生

Dr. HUI Yat Ming, Johnson

許一鳴醫生

24.1 家庭運動會籌備委員會 Family Sports Day Organizing Committee

主席 Chairman

Dr. HUI Yat Ming, Johnson

許一鳴醫生

成員 Members

Dr. AU Yiu Kai
Dr. CHAN Hau Ngai, Kingsley
Dr. CHAN Sju Yin, Fion
Dr. CHAN Wai Lok, Leo
Dr. CHIM, Stella

歐耀佳醫生
陳厚毅醫生
陳小燕醫生
陳偉樂醫生
詹愷怡醫生

Dr. IP Wing Yuk, Josephine
Dr. SO Man Hon
Dr. WONG Kee Lam
Dr. YU Wing Hay, Heidi

葉永玉醫生
蘇文瀚醫生
黃基林醫生
余穎曦醫生

24.2 體育成就獎遴選委員會 Selection Board for Sports Achievement Award

聯席主席 Co-Chairpersons

Dr. CHAN Hau Ngai, Kingsley
Dr. IP Wing Yuk, Josephine

陳厚毅醫生
葉永玉醫生

Dr. YEUNG Hip Wo, Victor

楊協和醫生

成員 Members

Dr. CHAN Che Keung
Dr. CHAN Nim Tak, Douglas
Dr. CHIN Chu Wah
Dr. FU Kam Fung, Kenneth

陳自強醫生
陳念德醫生
錢柱華醫生
傅錦峯醫生

Dr. KOO Hok Tin, Hilton
Dr. KWAN Man Woo
Dr. SO Yui Chi

古學滇醫生
關文護醫生
蘇睿智醫生

25. 青年委員會 Youth Committee

聯席主席 Co-Chairpersons

Dr. CHAN Tsz Tai

Dr. SIN Pui Yee, Helena

副主席 Vice-Chairman

Dr. TSE Tak Yin, Cyrus

顧問 Advisers

Dr. CHAN Yee Shing, Alvin

成員 Members

Dr. CHANG Yau Cheung, Johnny

Dr. CHONG King Yee

Dr. FUNG Tak Kwan, James

Dr. LEE Kai Cheung, Winson

Dr. LEE Kong Ngai, Paul

陳子泰醫生

冼佩儀醫生

謝得言醫生

陳以誠醫生

鄭又彰醫生

莊勁怡醫生

馮德焜醫生

李啟彰醫生

李罡毅醫生

Dr. YEUNG Hip Wo, Victor

楊協和醫生

Dr. LO Shing Wai, Sherwin

Dr. LUK Yiu Shiobhon

Dr. SIN Kin Man, Johnson

Dr. WU Tai Dong, Dex

Dr. WONG Cheuk Kei, Kathy

盧成璋醫生

陸 焯醫生

冼建文醫生

吳泰東醫生

黃卓琦醫生

25.1 醫學生小組 Medical Students' Subcommittee

顧問 Adviser

Dr. CHAN Tsz Tai

Dr. SIN Pui Yee, Helena

聯絡人 Coordinators

Mr. WONG Ching Him, Marcus (CUHK)

陳子泰醫生

冼佩儀醫生

黃程謙先生

Dr. YEUNG Hip Wo, Victor

Miss POON Ying Tung, Michelle (HKU)

楊協和醫生

潘映彤小姐

II. 專責委員會

Ad Hoc Committees

1. 香港醫學會百周年慶典籌備委員會 Organizing Committee on the HKMA 100th Anniversary Celebration

聯席主席 Co-Chairmen

Dr. CHENG Chi Man

鄭志文醫生

Dr. YEUNG Hip Wo, Victor

楊協和醫生

2. 社區關注及管理認知障礙症專責委員會 Task Force on Dementia Awareness and Management in the Community

主席 Chairman

Dr. SHEA Tat Ming, Paul

余達明醫生

3. 推廣健康運動專責委員會 Task Force on "Exercise for Health" Project

聯席主席 Co-Chairpersons

Dr. CHAN Yee Shing, Alvin

陳以誠醫生

Dr. IP Wing Yuk, Josephine

葉永玉醫生

4. 關注醫療保險專責委員會 Task Force on Medical Insurance Concerns

聯席主席 Co-Chairmen

Dr. CHENG Chi Man

鄭志文醫生

Dr. HO Hung Kwong, Duncan

何鴻光醫生

5. 公私營協作計劃委員會 Task Force on Public Private Partnership

聯席主席 Co-Chairmen

Dr. CHAN Yee Shing, Alvin

Dr. CHENG Chi Man

陳以誠醫生

鄭志文醫生

Dr. MAK Siu King

麥肇敬醫生

The President and the Honorary Secretary are ex-officio members in all committees.

會長及義務秘書為所有委員會和小組之當然成員。

附錄 A – 各項委任

Appendix A – Appointments for the Year

香港醫學會於法定機構及委員會代表 HKMA Representatives on Statutory Boards or Councils

1. **香港醫務化驗師管理委員會 Medical Laboratory Technologists Board**
Prof. TO Ka Fai (1 March 2018 – 28 February 2024) 杜家輝教授
2. **香港職業治療師管理委員會 Occupational Therapists Board**
Dr. IP Wing Yuk, Josephine (3 July 2020 - 2 July 2023) 葉永玉醫生
3. **香港視光師管理委員會 Optometrists Board**
Dr. PONG Chiu Fai (4 May 2021 – 3 May 2024) 羅智峯醫生
4. **香港藥劑業及毒藥管理局 Pharmacy & Poisons Board**
Dr. SO Yui Chi (1 January 2016 – 31 December 2021) 蘇睿智醫生
5. **香港物理治療師管理委員會 Physiotherapists Board**
Dr. IP Wing Yuk, Josephine (22 May 2016 – 21 May 2022) 葉永玉醫生
6. **香港放射技師管理委員會 Radiographers Board**
Dr. Simon TANG (1 September 2016 – 31 August 2022) 唐少文醫生
7. **社會工作者註冊局 — 學歷認可評審團 Social Workers Registration Board – Assessment Recognition Assessment Panel**
Dr. CHOW Wing Sun (18 March 2021 to 31 August 2024) 周榮新醫生
8. **香港醫務委員會 The Medical Council of Hong Kong**
Dr. HO Hung Kwong, Duncan (24 January 2018 – 23 January 2024) 何鴻光醫生
Dr. MAK Siu King (24 January 2020 – 23 January 2024) 麥肇敬醫生
Dr. IP Wing Yuk, Josephine (24 January 2013 – 23 January 2022) 葉永玉醫生
Dr. YEUNG Hip Wo, Victor (24 January 2019 – 23 January 2022) 楊協和醫生
Dr. CHEUNG Hon Ming (24 January 2008 – 23 January 2023) 張漢明醫生
Dr. LEUNG Chi Chiu (24 January 2008 – 23 January 2023) 梁子超醫生
- 8.1 **教育及評審委員會 Education & Accreditation Committee**
Dr. TONG Kai Sing (22 January 2018 – 21 January 2024) 唐繼昇醫生
- 8.2 **健康事務委員會 Health Committee**
Dr. CHOW Wing Sun (6 January 2021 – 5 January 2022) 周榮新醫生
Dr. SIN Pui Yee, Helena (3 November 2020 - 23 January 2022) 冼佩儀醫生
- 8.3 **執照組 Licentiate Committee**
Dr. CHONG King Yee (12 February 2021 – 11 February 2024) 莊勁怡醫生
- 8.3.1 **執照組資格審核小組 Credentials Sub-Committee of the Licentiate Committee**
Dr. NG Chi Ho (1 January 2019 – 31 December 2021) 吳志豪醫生
Dr. ZHU Xian Lun (1 January 2019 – 31 December 2021) 朱獻倫醫生
- 8.3.2 **執照組豁免小組 Exemption Sub-Committee of the Licentiate Committee**
Dr. LAM Ho (1 January 2019 – 31 December 2021) 林 賀醫生
- 8.3.3 **執照組覆核小組 Review Sub-Committee of the Licentiate Committee**
Dr. YEUNG Chiu Fat, Henry (1 January 2020 – 31 December 2022) 楊超發醫生
- 8.4 **當作偵委會 Deemed Preliminary Investigation Committee**
Dr. SO Yui Chi (2 February 2018 – 23 January 2022) 蘇睿智醫生
- 8.5 **審裁員 Medical Accessors**
Dr. CHAN Nim Tak, Douglas (3 October 2018 – 2 October 2021) 陳念德醫生
Dr. WONG Yee Him (3 October 2018 – 2 October 2021) 黃以謙醫生
Dr. CHOW Wing Sun (6 January 2021 – 5 January 2024) 周榮新醫生
Dr. LAM Ho (8 January 2020 – 7 January 2023) 林 賀醫生
9. **香港獸醫管理局 The Veterinary Surgeons Board of Hong Kong**
Dr. YEUNG Chiu Fat, Henry (16 September 2018 – 15 September 2021) 楊超發醫生

香港醫學會在非法定組織及其他專業團體代表

HKMA Representatives on Non-Statutory Boards, Councils and Other Professional Organizations

1. 建設健康九龍城協會有限公司 — 董事局 Building Healthy Kowloon City Association Limited – Board of Directors
 Dr. CHAN Yee Shing, Alvin 陳以誠醫生
2. 衛生署 — 基層醫療抗生素導向諮詢委員會
 Department of Health – Advisory Group for Antibiotic Stewardship in Primary Care Settings in Hong Kong
 Dr. CHOI Kin 蔡 堅醫生
3. 衛生署 — 基層醫療指南諮詢委員會 Department of Health – Advisory Committee on Primary Care Directory
 Dr. CHAN Nim Tak, Douglas 陳念德醫生
4. 衛生署 — 衛生防護中心 — 感染控制科學委員會 — 抗生素抗藥性健康保障計劃
 Department of Health – Centre for Health Protection – Health Protection Program on Antimicrobial Resistance of Scientific Committee on Infection Control
 Dr. TSANG Kay Yan 曾祈殷醫生
5. 衛生署 — 大腸癌 篩選先導計劃專責小組 Department of Health – Colorectal Cancer Screening Programme Task Force
 Dr. FUNG Tak Kwan, James 馮德焜醫生
- 5.1 大便隱血測試工作小組 Working Group on Use of FIT
 Dr. LEE Fook Kay 李福基醫生
- 5.2 大腸鏡檢查和評估工作小組 Working Group on Colonoscopy and Assessment
 Dr. FUNG Tak Kwan, James 馮德焜醫生
- 5.3 篩檢數據庫工作小組 Working Group on Screening Registry
 Dr. IP Wing Yuk, Josephine 葉永玉醫生
6. 促進母乳餵哺委員會 Department of Health – Committee on Promotion of Breastfeeding
 Dr. CHAN Yee Shing (1 April 2021 – 31 March 2023) 陳以誠醫生
7. 衛生署 — 「母乳餵哺 - 醫生自學資料套計劃」籌備委員會
 Department of Health – Planning Committee on Development of Self Learning Kit on Breastfeeding for Medical Professionals
 Dr. CHAN Yee Shing, Alvin 陳以誠醫生
8. 衛生署 — 私營醫療機構規管標準諮詢委員會
 Department of Health – Advisory Committee for Regulatory Standards for Private Healthcare Facilities
 Dr. CHOI Kin 蔡 堅醫生
9. 衛生署 — 私營醫療機構投訴委員會 Department of Health – Committee on Complaints against Private Healthcare Facilities
 Dr. YEUNG Hip Wo, Victor 楊協和醫生
10. 衛生署 — 修訂運動處方計劃教材套工作小組
 Department of Health – Working Group for Revision of Teaching Kit for the Exercise Prescription Project
 Dr. CHAN Yee Shing, Alvin 陳以誠醫生
11. 衛生署 — 死因分類工作組 Department of Health – Working Group on Documentation of Cause of Death
 Dr. CHEUNG Hon Ming (since November 2008) 張漢明醫生
12. 香港中文大學體育運動科學系 — 「運動是良藥 — 香港」諮詢委員會
 Department of Sports Science & Physical Education, CUHK — “Exercise is Medicine — Hong Kong” Advisory Board
 Dr. IP Wing Yuk, Josephine 葉永玉醫生
13. 溫莎公爵社會服務大廈 — 物業管理委員會 Duke of Windsor Social Service Building – Building Management Committee
 Dr. IP Wing Yuk, Josephine 葉永玉醫生
 Ms. Jovi LAM (Alternate Delegate) 林偉珊女士
14. 僱員再培訓局 — 健康護理業行業諮詢網絡 Employees Retraining Board – Health Care Industry Consultative Networks
 Dr. LEE Fook Kay, Aaron (June 2014 – 31 March 2022) 李福基醫生
15. 香港家庭計劃指導會 — 道德評審委員會 Family Planning Association of Hong Kong – Ethics Panel
 Dr. HO Hung Kwong 何鴻光醫生

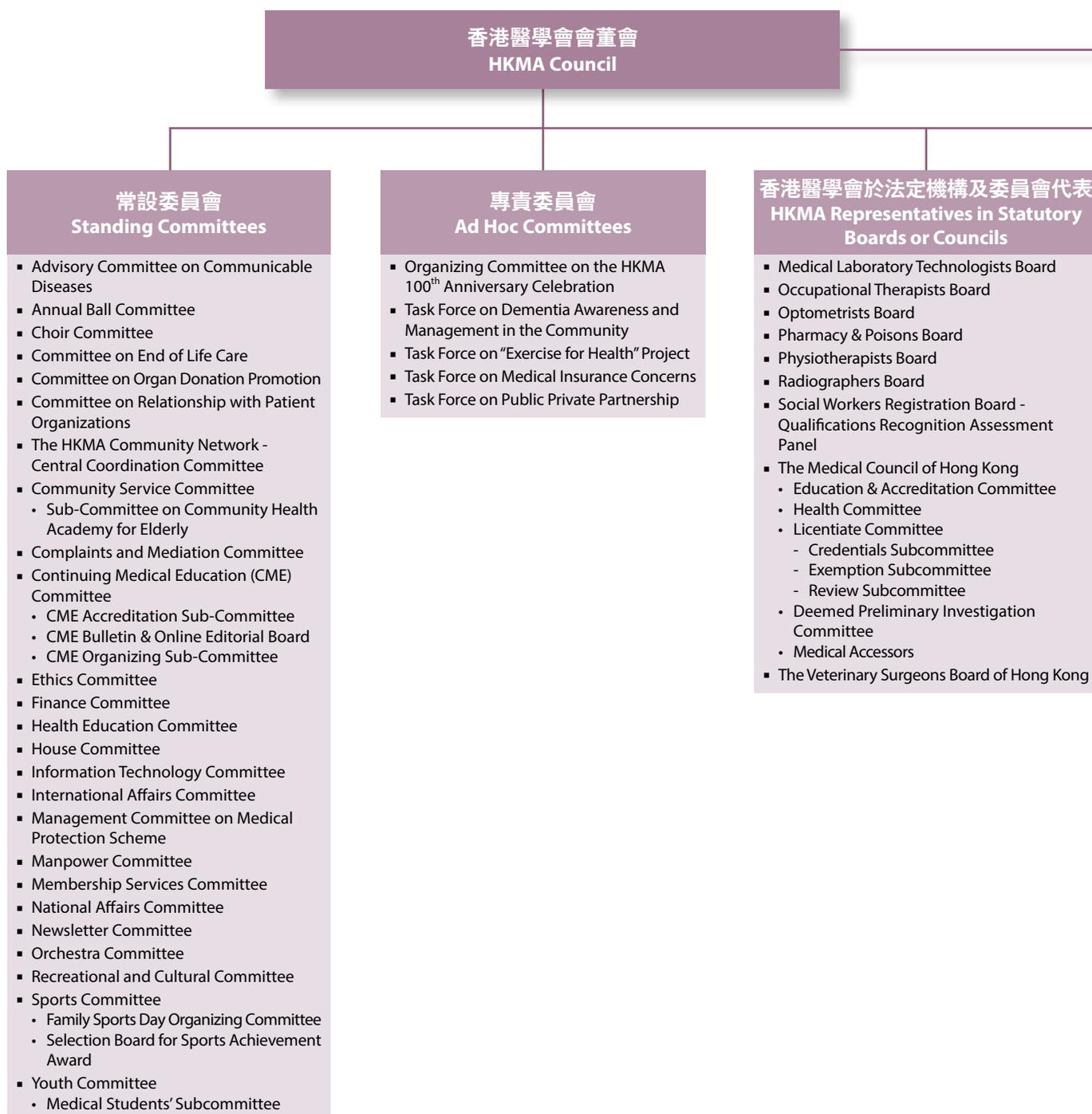
附錄 A – 各項委任

Appendix A – Appointments for the Year

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| 16. | 香港醫學組織聯會 Federation of Medical Societies of Hong Kong
Dr. YEUNG Hip Wo, Victor | 楊協和醫生 |
| 16.1 | Care for the Advanced Diseases Consortium
Dr. CHOI Kin | 蔡 堅醫生 |
| 17. | 食物及衛生局 — 參考概覽專家小組 Food and Health Bureau – Expert Panel on Reference Frameworks
Dr. CHOI Kin | 蔡 堅醫生 |
| 18. | 食物及衛生局 — 電子健康記錄互通督導委員會 Food and Health Bureau – Steering Committee on eHealth Record Sharing
Dr. MAK Siu King (27 January 2021 – 16 October 2022) | 麥肇敬醫生 |
| 18.1 | 電子健康記錄協作工作小組 Working Group on eHealth Record Partnership
Dr. CHONG Lap Chun (29 October 2019 – 16 October 2022) | 莊立村醫生 |
| 18.2 | 法律、私隱及保安問題工作小組 Working Group on Legal, Privacy & Security Issues
Dr. CHENG Chi Man (17 October 2019 – 16 October 2022) | 鄭志文醫生 |
| 18.3 | 電子健康紀錄及信息標準工作小組 Working Group on eHealth Record & Information Standards
Dr. CHONG Lap Chun (29 October 2019 – 16 October 2022) | 莊立村醫生 |
| 18.4 | 電子健康紀錄放射圖像互通委員會 Task Force on eHealth Record Radiology Image Sharing
Dr. CHAN Tin Sang, Augustine | 覃天笙醫生 |
| 19. | 食物及衛生局 — 香港非傳染病防控督導委員會
Food and Health Bureau – Steering Committee on Prevention and Control of Non-communicable Diseases
Dr. CHOI Kin (11 September 2020 - 23 November 2021) | 蔡 堅醫生 |
| 20. | 食物及衛生局 — 醫護人力規劃和專業發展策略檢討督導委員會醫學小組
Food and Health Bureau – Medical Subgroup of the Steering Committee on Strategic Review on Healthcare Manpower Planning and Professional Development
Dr. CHOI Kin | 蔡 堅醫生 |
| 21. | 食物及衛生局 — 抗菌素耐藥性高層督導委員會 Food and Health Bureau – High Level Steering Committee on Antimicrobial Resistance
Dr. CHOI Kin (11 September 2020 – 31 May 2022) | 蔡 堅醫生 |
| 22. | 食物及衛生局 — 健康護理及促進委員會小組委員會
Food and Health Bureau—Promotion Sub-committee of Health Care and Promotion Committee
Dr. CHAN Nim Tak, Douglas | 陳念德醫生 |
| 23. | 健康與醫務發展諮詢委員會 — 食物營養標籤教育工作小組
Health & Medical Development Advisory Committee—Task Force on Nutrition Labelling Education
Dr. CHAN Yee Shing, Alvin (Since December 2008) | 陳以誠醫生 |
| 24. | 香港大律師公會 — 法律義助計劃 Hong Kong Bar Association – Advisory Board on the Free Legal Service Scheme
Dr. CHOI Kin | 蔡 堅醫生 |
| 25. | 香港義務工作議會 Hong Kong Council of Volunteering
Dr. CHAN Yee Shing, Alvin | 陳以誠醫生 |
| 26. | 心臟基金會 — 愛心信託基金 Hong Kong Heart Foundation Ltd. – Heart Care Trust Fund Committee
Dr. LI Siu Lung, Steven | 李少隆醫生 |
| 27. | 香港復康聯會 Hong Kong Joint Council for People with Disabilities
Dr. IP Wing Yuk, Josephine (wef May 2016) | 葉永玉醫生 |
| 28. | 醫院管理局 — 香港獅子會眼庫 — 董事會 Hospital Authority – The Lions Eye Bank of Hong Kong – Board of Directors
Dr. LAM King Tak (wef July 2019) | 林敬德醫生 |
| 29. | IMPACT Editorial Board
編輯委員會 IMPACT
Dr. TSANG Kay Yan | 曾祈殷醫生 |
| 30. | 專業聯合中心董事會 Joint Professional Centre – Board of Directors
Dr. CHAN Hau Ngai, Kingsley | 陳厚毅醫生 |
| 31. | 華商會所大廈業主立案法團 — 物業管理委員會 Management Committee of the Incorporated Owners of the Chinese Club Building
Dr. IP Wing Yuk, Josephine
Ms. Jovi LAM (Alternate Delegate) | 葉永玉醫生
林偉珊女士 |

32. 職業安全健康局 — 職業健康諮詢委員會 Occupational Safety & Health Council – Occupational Health Advisory Committee
 Dr. KWOK Kai Him, Henry (22 August 2014 – 21 August 2020) 郭啟謙醫生
33. 職業安全健康局 — 醫護服務業安全及健康委員會
 Occupational Safety & Health Council – Health Care Services Safety & Health Committee
 Dr. LEUNG Chi Chiu (1 April 2007 – 31 March 2023) 梁子超醫生
34. 社會保障上訴委員會 — 健康狀況評估組 Social Security Appeal Board – Medical Assessment Board
 Dr. LEUNG Chi Chiu (Convener) (召集人) 梁子超醫生
35. 職業訓練局 — 匯縱專業發展中心醫療護理業行業培訓小組
 Vocational Training Council – Integrated Vocational Development Centre (IVDC) Working Group for Careers in the Medical and Health Industry
 Dr. LEE Fook Kay, Aaron 李福基醫生
36. 世界醫學會 World Medical Association
- 36.1 世界醫學會 — 財務及籌劃委員會 World Medical Association – Finance and Planning Committee
 Dr. YEUNG Hip Wo, Victor 楊協和醫生
- 36.2 世界醫學會 — 醫學道德委員會 World Medical Association – Medical Ethics Committee
 Dr. CHENG Chi Man 鄭志文醫生
- 36.3 世界醫學會 — 社會醫學事務委員會 World Medical Association – Socio-medical Affairs Committee
 Dr. CHAN Yee Shing, Alvin 陳以誠醫生
37. 灣仔區議會屬下衛生健康活力城推廣委員會 Promotion Committee of “Hygienic, Healthy & Dynamic City” of Wan Chai District Council
 Ms. Jovi LAM 林偉珊女士
- 37.1 「健樂灣仔」期刊編輯小組
 Promotion Committee of “Hygienic, Healthy & Dynamic City” of Wan Chai District Council – Editorial Board of “Healthy & Joyous Living Wan Chai” Quarterly
 Ms. Jovi LAM 林偉珊女士
- 37.2 「灣仔區精神健康普查」工作小組
 Promotion Committee of “Hygienic, Healthy & Dynamic City” of Wan Chai District Council – Working Group on Mental Health Survey in Wan Chai
 Ms. Jovi LAM 林偉珊女士

會員大會



秘書處
 Secretariat

香港醫學會在非法定組織及其他專業團體代表
 HKMA Representatives in Non-Statutory Boards, Councils and Other Professional Organizations

- | | | |
|--|--|--|
| <ul style="list-style-type: none"> ▪ Building Health Kowloon City Association Limited - Board of Directors ▪ Department of Health <ul style="list-style-type: none"> • Advisory Group for Antibiotic Stewardship in Primary Care Settings in Hong Kong • Advisory Committee on Primary Care Directory • Centre for Health Protection Health Protection Program on Antimicrobial Resistance of Scientific Committee on Infection Control • Colorectal Cancer Screening Programme Task Force <ul style="list-style-type: none"> - Working Group on Use of FIT - Working Group on Colonoscopy and Assessment - Working Group on Screening Registry • Committee on Promotion of Breastfeeding • Planning Committee on Development of Self-Learning Kit on Breastfeeding for Medical Professionals • Advisory Committee for Regulatory Standards for Private Healthcare Facilities • Committee on Complaints against Private Healthcare Facilities • Working Group of the Revision of Teaching Kit for the Exercise Prescription Project • Working Group on Documentation of Cause of Death ▪ Department of Sports Science & Physical Education, CUHK Exercise is Medicine Hong Kong " Advisory Board | <ul style="list-style-type: none"> ▪ Duke of Windsor Social Service Building - Building Management Committee ▪ Employees Retraining Board - Health Care Industry Consultative Networks ▪ Federation of Medical Societies of Hong Kong <ul style="list-style-type: none"> • Care for the Advanced Diseases Consortium ▪ Food and Health Bureau <ul style="list-style-type: none"> • Expert Panel on Reference Frameworks • Steering Committee on eHealth Record Sharing <ul style="list-style-type: none"> - Working Group on eHealth Record Partnership - Working Group on Legal, Privacy & Security Issues - Working Group on eHealth Record & Information Standards - Task Force on eHealth Record Radiology Image Sharing • Steering Committee on Prevention and Control of Non-communicable Diseases • Medical Subgroup of the Steering Committee on Strategic Review on Healthcare Manpower Planning and Professional Development • High Level Steering Committee on Antimicrobial Resistance • Promotion Sub-committee of Health Care and Promotion Committee • Task Force on Nutrition Labelling Education ▪ Hong Kong Bar Association - Advisory Board on the Free Legal Service Scheme ▪ Hong Kong Council of Volunteering | <ul style="list-style-type: none"> ▪ Hong Kong Heart Foundation Ltd.- Heart Care Trust Fund Committee ▪ Hong Kong Joint Council for People with Disabilities ▪ Hospital Authority - The Lions Eye Bank of Hong Kong - Board of Directors ▪ IMPACT Editorial Board ▪ Joint Professional Centre - Board of Directors ▪ Management Committee of the Incorporated Owners of the Chinese Club Building ▪ Occupational Safety & Health Council <ul style="list-style-type: none"> • Occupational Health Advisory Committee • Health Care Services Safety & Health Committee ▪ Social Security Appeal Board – Medical Assessment Board ▪ Vocational Training Council - IVDC Working Group for Careers in the Medical and Health Industry ▪ World Medical Association <ul style="list-style-type: none"> • Finance and Planning Committee • Medical Ethics Committee • Socio-medical Affairs Committee ▪ Promotion Committee of "Hygienic, Healthy & Dynamic City" <ul style="list-style-type: none"> • Editorial Board of "Healthy & Joyous Living Wan Chai" Quarterly • Working Group on Mental Health Survey in Wan Chai |
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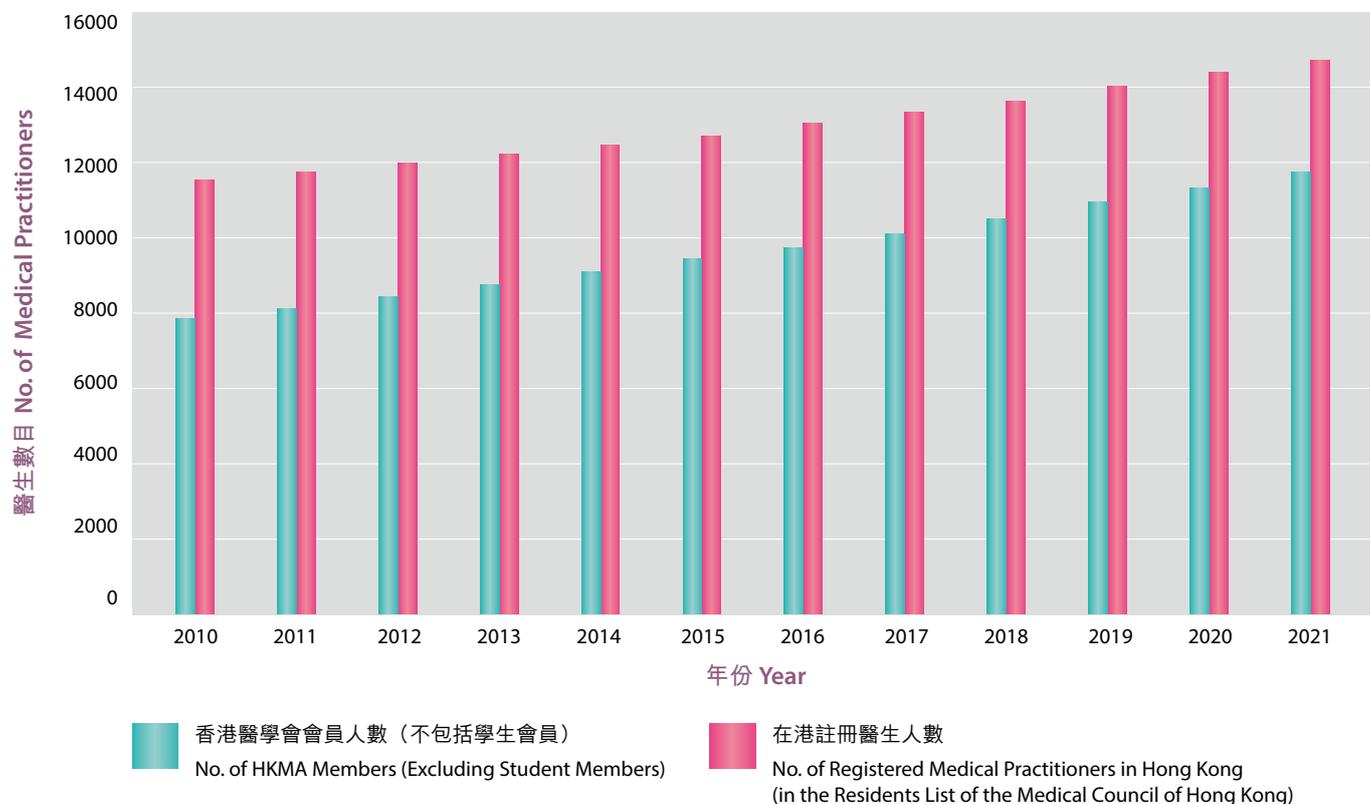
附錄 B – 香港醫學會及秘書處組織架構

Appendix B – The HKMA Organizational Structure and the Secretariat

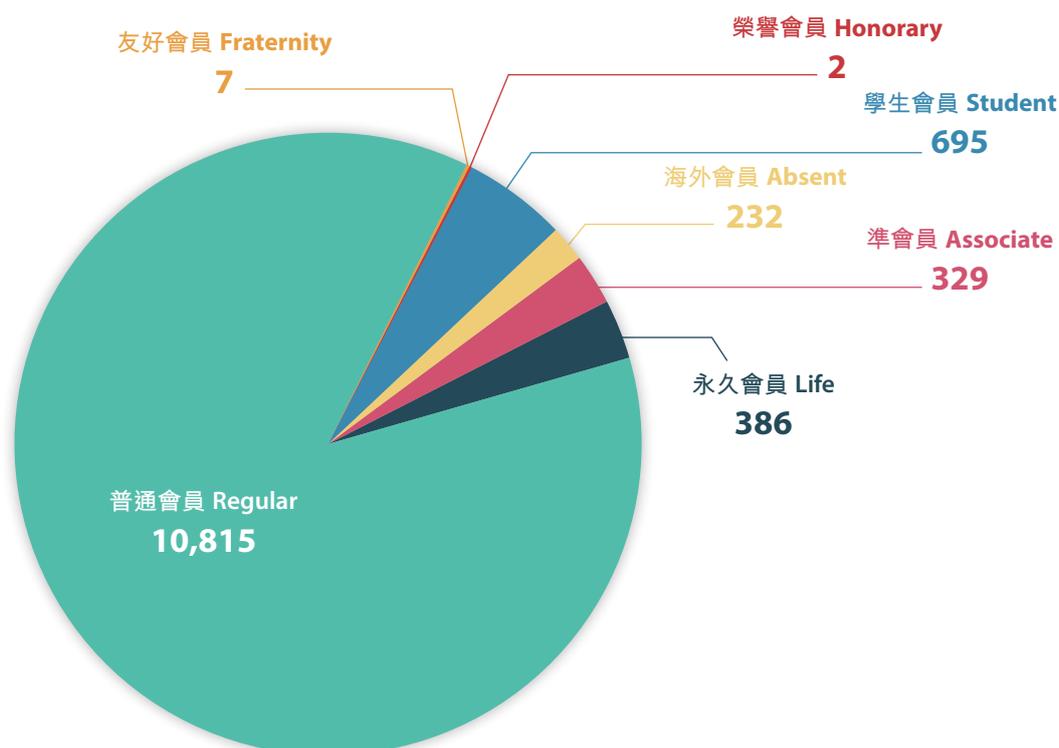


附錄 C – 會員檔案 Appendix C – Membership Profile

I. 會員人數 (截至二零二一年二月二十八日) Membership Strength as at 28 February 2021



II. 會員類別 (截至二零二一年二月二十八日) Membership Strength as at 28 February 2021



附錄 D – 歷屆會長芳名

Appendix D – List of Past Presidents

1920-1922	Dr. WAN Man Kai	尹文楷醫生	1955-1957	Dr. WU Ta Piao	吳達表醫生
1922-1923	Dr. KWAN King Leung	關景良醫生	1957-1958	Dr. MAO Wen Chee, Philip	毛文奇醫生
1923-1924	Dr. JEU Hawk	趙 學醫生	1958-1959	Dr. LING Ke Dieh	林開第醫生
1924-1925	Dr. WOO Wai Tak, Arthur	胡惠德醫生	1959-1960	Dr. YANG Kyung Waung, Raymond	楊景煌醫生
1925-1926	Dr. HO Shai Chuen	何世全醫生	1960-1962	Dr. MAO Wen Chee, Philip	毛文奇醫生
1926-1927	Dr. LI Shu Fan	李樹芬醫生	1962-1964	Dr. ONG Guan Bee	王源美醫生
1927-1928	Dr. CHAU Wai Cheung	周懷璋醫生	1964-1966	Prof. Daphne CHUN	秦惠真教授
1928-1929	Dr. JEU Hawk	趙 學醫生	1966-1968	Dr. FANG Sin Yang, Harry	方心讓醫生
1929-1930	Dr. WONG Man	黃 雯醫生	1968-1970	Dr. LEE Chung Yin, Peter	李仲賢醫生
1930-1931	Dr. WAN Yik Shing	尹奕聲醫生	1970-1972	Dr. CHOW Po Wong, Christina	周寶煌醫生
1931-1932	Dr. LI Shu Fan	李樹芬醫生	1972-1976	Dr. LEE Chung Yin, Peter	李仲賢醫生
1932-1933	Dr. LI Tsoo Yiu (before amalgamation)	李祖佑醫生	1976-1978	Dr. LI Fook Kuen, Henry	李福權醫生
	Dr. YEO Kok Cheang (after amalgamation)	楊國璋醫生	1978-1980	Dr. George CHOA	蔡永善醫生
1933-1934	Dr. CHAU Wai Cheung	周懷璋醫生	1980-1982	Dr. WONG Chak Tong, David	黃澤棠醫生
1934-1935	Dr. PHOON Seck Wah	潘錫華醫生	1982-1984	Dr. YUEN Chung Lau, Natalis	阮中鏗醫生
1935-1936	Dr. IP Kam Wa	葉錦華醫生	1984-1988	Dr. WU Wai Yung, Raymond	鄔維庸醫生
1936-1937	Dr. CHAU Sik Nin	周錫年醫生	1988-1992	Dr. LEONG Che Hung	梁智鴻醫生
1937-1939	Dr. LI Shu Pui	李樹培醫生	1992-1994	Dr. David FANG	方津生醫生
1939-1940	Dr. CHAU Wai Cheung	周懷璋醫生	1994-1998	Dr. LEE Kin Hung	李健鴻醫生
1940-1946	Dr. SUN, Edward Wickham Jueyow	孫潤焜醫生	1998-2000	Dr. SO Kai Ming	蘇啟明醫生
1946-1947	Dr. CHAN Hee Chi	陳希之醫生	2000-2004	Dr. LO Wing Lok	勞永樂醫生
1947-1949	Dr. TSEUNG Fat Im	蔣法賢醫生	2004-2008	Dr. CHOI Kin	蔡 堅醫生
1949-1950	Dr. HUA Tse Jen	華則仁醫生	2008-2010	Dr. TSE Hung Hing	謝鴻興醫生
1950-1951	Dr. LAM Chi Wei	林志緯醫生	2010-2012	Dr. CHOI Kin	蔡 堅醫生
1951-1952	Dr. LEE Hah Liong	李學良醫生	2012-2014	Dr. TSE Hung Hing	謝鴻興醫生
1952-1953	Dr. PANG Hock Koo	彭學高醫生	2014-2016	Dr. SHIH Tai Cho, Louis	史泰祖醫生
1953-1954	Dr. LEE Hah Liong	李學良醫生	2016-2018	Dr. CHOI Kin	蔡 堅醫生
1954-1955	Dr. LAM Chi Wei	林志緯醫生	2018-2020	Dr. HO Chung Ping	何仲平醫生

財政報告

Financial Report

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REPORT OF MEMBERS OF COUNCIL

The Council has pleasure in submitting to the members the annual report and financial statements for the year ended 28 February 2021.

PRINCIPAL ACTIVITIES

The principal activities of the Association are the promotion of the welfare and the protection of the lawful interests of the medical profession.

FINANCIAL STATEMENTS

The financial performance and the movements of the designated funds of the Association for the year ended 28 February 2021 and the financial position of the Association at that date are set out in the financial statements on pages 66 to 84.

MEMBERS OF THE COUNCIL

The following members served on the Council during the financial year and up to the date of this report:

Dr. Chan Hau Ngai, Kingsley		Dr. Ho Hung Kwong, Duncan	
Dr. Chan Nim Tak, Douglas		Dr. Ip Wing Yuk, Josephine	
Dr. Chan, Pierre		Dr. Kei Shiu Kong	(Elected on 14 July 2020)
Dr. Chan Siu Kim		Dr. Lam Ho	
Dr. Chan Tin Sang, Augustine	(Elected on 14 July 2020)	Dr. Lee Fook Kay, Aaron	
Dr. Chan Tsz Tai	(Elected on 14 July 2020)	Dr. Mak Siu King	
Dr. Chan Yee Shing	(Elected on 14 July 2020)	Dr. Ng Chi Ho	
Dr. Cheng Chi Man		Dr. Shea Tat Ming, Paul	
Dr. Cheung Hon Ming		Dr. Sin Pui Yee, Helena	
Dr. Choi Kin		Dr. So Yui Chi	
Dr. Chong King Yee	(Appointed on 4 August 2020)	Dr. Tong Kai Sing	
Dr. Chow Wing Sun	(Elected on 15 July 2020)	Dr. Wong Bun Lap, Bernard	
Dr. Fung Tak Kwan, James		Dr. Yeung Chiu Fat, Henry	
Dr. Ho Chung Ping		Dr. Yeung Hip Wo, Victor	

ATTENDANCE AT COUNCIL MEETINGS

Since the last annual general meeting held on 14 July 2020, 11 regular meetings and 2 extra meetings of the Council had been held and the attendance of council members at these meetings was as follows:

	Number of attendance at Council meetings		Number of attendance at Council meetings
Dr. Chan Hau Ngai, Kingsley	9	Dr. Ho Hung Kwong, Duncan	9
Dr. Chan Nim Tak, Douglas	13	Dr. Ip Wing Yuk, Josephine	10
Dr. Chan, Pierre	9	Dr. Kei Shiu Kong	13
Dr. Chan Siu Kim	8	Dr. Lam Ho	10
Dr. Chan Tin Sang, Augustine	9	Dr. Lee Fook Kay, Aaron	12
Dr. Chan Tsz Tai	11	Dr. Mak Siu King	12
Dr. Chan Yee Shing	13	Dr. Ng Chi Ho	4
Dr. Cheng Chi Man	12	Dr. Shea Tat Ming, Paul	13
Dr. Cheung Hon Ming	8	Dr. Sin Pui Yee, Helena	9
Dr. Choi Kin	13	Dr. So Yui Chi	9
Dr. Chong King Yee	11	Dr. Tong Kai Sing	12
Dr. Chow Wing Sun	12	Dr. Wong Bun Lap, Bernard	1
Dr. Fung Tak Kwan, James	12	Dr. Yeung Chiu Fat, Henry	11
Dr. Ho Chung Ping	4	Dr. Yeung Hip Wo, Victor	13

MANAGEMENT CONTRACTS

No contracts concerning the management and administration of the whole or any substantial part of the Association's business were entered into or existed during the year.

PERMITTED INDEMNITY PROVISIONS

At no time during the year and up to the date of this council members' report, there was or is, any permitted indemnity provision being in force for the benefit of any of the council members of the Association (whether made by the Association or otherwise).

MEMBERSHIP

During the year, a total of 5 life member, 143 regular members, 142 student members and 85 associate members joined the Association. As at 28 February 2021, the total number of members was 12,458, of which 10,119 are regular members, 687 newly qualified members, 388 life members, 2 honorary members, 694 student members, 232 absent members, 329 associate members and 7 fraternity members.

HONORARY AUDITORS

The financial statements have been audited by Messrs. Li, Tang, Chen & Co., who retire but, being eligible, offer themselves for re-appointment.

On behalf of the Council

Dr. Choi Kin

President

Hong Kong, 1 June 2021

INDEPENDENT AUDITOR'S REPORT

TO THE MEMBERS OF THE HONG KONG MEDICAL ASSOCIATION

(incorporated in Hong Kong and limited by guarantee)

OPINION

We have audited the financial statements of The Hong Kong Medical Association ("the Association") set out on pages 66 to 84, which comprise the statement of financial position as at 28 February 2021, and the statement of comprehensive income and the statement of changes in funds and the statement of cash flows for the year then ended, and notes on the financial statements, including a summary of significant accounting policies.

In our opinion, the financial statements give a true and fair view of the financial position of the Association as at 28 February 2021, and of its financial performance and its cash flows for the year then ended in accordance with Hong Kong Financial Reporting Standards ("HKFRSs") issued by the Hong Kong Institute of Certified Public Accountants ("HKICPA") and have been properly prepared in compliance with the Hong Kong Companies Ordinance.

BASIS FOR OPINION

We conducted our audit in accordance with Hong Kong Standards on Auditing ("HKSAAs") issued by the HKICPA. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Association in accordance with the HKICPA's Code of Ethics for Professional Accountants ("the Code"), and we have fulfilled our other ethical responsibilities in accordance with the Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

OTHER INFORMATION

The council members are responsible for the other information. The other information comprises all the information included in the council members' report, but does not include the financial statements and our auditor's report thereon.

Our opinion on the financial statements does not cover the other information and we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated.

If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

RESPONSIBILITIES OF COUNCIL MEMBERS FOR THE FINANCIAL STATEMENTS

The council members are responsible for the preparation of financial statements that give a true and fair view in accordance with HKFRSs issued by the HKICPA and the Hong Kong Companies Ordinance and for such internal control as the council members determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the council members are responsible for assessing the Association's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the council members either intend to liquidate the Association or to cease operations, or have no realistic alternative but to do so.

The council members are responsible for overseeing the Association's financial reporting process.

AUDITOR'S RESPONSIBILITIES FOR THE AUDIT OF THE FINANCIAL STATEMENTS

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. We report our opinion solely to you, as a body, in accordance with section 405 of the Hong Kong Companies Ordinance, and for no other purpose. We do not assume responsibility towards or accept liability to any other person for the contents of this report.

Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with HKSAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with HKSAs, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Association's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the council members.
- Conclude on the appropriateness of the council members' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Association's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Association to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the council members regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Li, Tang, Chen & Co.
Certified Public Accountants (Practising)
Honorary Auditors

Hong Kong, 1 June 2021

STATEMENT OF FINANCIAL POSITION

AS AT 28 FEBRUARY 2021

	Note		2021	2020
		HK\$	HK\$	HK\$
NON-CURRENT ASSETS				
Property, plant and equipment	5		11,429,466	11,945,685
Investment property	6		81,963	81,963
Prepaid lease payments on land use rights	7		94,783	98,429
Financial assets at fair value through other comprehensive income	8		10,798,745	17,511,378
			22,404,857	29,637,455
CURRENT ASSETS				
Inventories	3(f)	197,077		679,165
Prepaid lease payments on land use rights	7	3,645		3,645
Utility and other deposits		176,687		145,717
Sundry receivables and prepayments		3,608,387		2,104,924
Cash and bank balances	9	54,187,894		51,803,497
		58,173,690		54,736,948
CURRENT LIABILITIES				
Amount due to a related company	10	1,176		1,280
Receipts in advance, sundry payables and accruals		44,738,284		44,959,947
		44,739,460		44,961,227
NET CURRENT ASSETS			13,434,230	9,775,721
NET ASSETS			35,839,087	39,413,176
FUNDS				
General Fund	23		10,692,927	14,555,860
Special Fund	23		15,340,728	15,408,464
Permanent Premises Fund	23		4,224,653	4,224,653
Public Medical Education Foundation Fund	23		248,113	248,112
HKMA China Relief Fund	23		63,313	63,313
New Premises Fund	23		6,281,573	6,281,573
Investment Revaluation Reserve	23		(1,012,220)	(1,368,799)
TOTAL FUNDS			35,839,087	39,413,176

The financial statements on pages 66 to 84 were approved and authorised for issue by the Council on 1 June 2021

Dr. Choi Kin
President

Dr. Yeung Hip Wo, Victor
Honorary Treasurer

STATEMENT OF COMPREHENSIVE INCOME

FOR THE YEAR ENDED 28 FEBRUARY 2021

	Note	2021 HK\$	2020 HK\$
MEMBERSHIP AND SUBSCRIPTION FEES	11	113,850	59,050
OTHER INCOME AND NET GAINS	11	12,678,766	15,490,824
ADMINISTRATIVE AND OTHER OPERATING EXPENSES	12	(12,860,352)	(16,381,017)
DEFICIT BEFORE TAXATION		(67,736)	(831,143)
TAXATION	22	-	-
DEFICIT FOR THE YEAR		(67,736)	(831,143)
TRANSFER FROM SPECIAL FUND FOR SUBSCRIPTIONS RECEIVABLE WAIVED FOR 2020/21		4,157,600	4,002,800
NET SURPLUS FOR THE YEAR TRANSFERRED TO GENERAL FUND	23	4,089,864	3,171,657
OTHER COMPREHENSIVE EXPENSE			
Items that will not be reclassified to surplus or deficit:			
- Equity securities designated at FVOCI net movement in fair value reserve (non-recycling)		(3,506,354)	(5,363,282)
- Interest income from HKMA China Relief Fund		-	84
- Interest income from Public Medical Education Foundation Fund		1	225
OTHER COMPREHENSIVE EXPENSE FOR THE YEAR		(3,506,353)	(5,362,973)
TOTAL COMPREHENSIVE INCOME/(EXPENSE) FOR THE YEAR		583,511	(2,191,316)

STATEMENT OF CHANGES IN FUNDS

FOR THE YEAR ENDED 28 FEBRUARY 2021

	General Fund	Special Fund	Permanent Premises Fund	Public Medical Education Foundation Fund	HKMA China Relief Fund	New Premises Fund	Fair value Reserve (non-recycling)	Total
	HK\$	HK\$	HK\$	HK\$	HK\$	HK\$	HK\$	HK\$
At 28 February 2019	14,555,860	16,239,607	4,224,653	247,887	63,229	6,281,573	3,994,483	45,607,292
Surplus for the year	3,171,657	-	-	-	-	-	-	3,171,657
Other comprehensive income for the year								
- Interest income	-	-	-	225	84	-	-	309
- Charges in fair value of available-for-sale financial assets	-	-	-	-	-	-	(5,363,282)	(5,363,282)
	-	-	-	225	84	-	(5,363,282)	(5,362,973)
Total comprehensive income/(expense) for the year	3,171,657	-	-	225	84	-	(5,363,282)	(2,191,316)
Transfer to special fund (note 23)	(3,171,657)	3,171,657	-	-	-	-	-	-
Transfer to statement of comprehensive income for subscriptions receivable waived for 2019/20	-	(4,002,800)	-	-	-	-	-	(4,002,800)
At 29 February 2020	14,555,860	15,408,464	4,224,653	248,112	63,313	6,281,573	(1,368,799)	39,413,176
Surplus for the year	4,089,864	-	-	-	-	-	-	4,089,864
Other comprehensive expense for the year								
- Interest income	-	-	-	1	-	-	-	1
- Charges in fair value of available-for-sale financial assets	-	-	-	-	-	-	(3,506,354)	(3,506,354)
	-	-	-	1	-	-	(3,506,354)	(3,506,353)
Total comprehensive income for the year	4,089,864	-	-	1	-	-	(3,506,354)	583,511
Transfer to special fund (note 23)	(4,089,864)	4,089,864	-	-	-	-	-	-
Reserve released on disposal of investments to general fund	(3,862,933)	-	-	-	-	-	3,862,933	-
Transfer to statement of comprehensive income for subscriptions receivable waived for 2020/21	-	(4,157,600)	-	-	-	-	-	(4,157,600)
At 28 February 2021	10,692,927	15,340,728	4,224,653	248,113	63,313	6,281,573	(1,012,220)	35,839,087

STATEMENT OF CASH FLOWS

FOR THE YEAR ENDED 28 FEBRUARY 2021

	Note	2021 HK\$	2020 HK\$
CASH FLOWS FROM OPERATING ACTIVITIES			
Deficit before taxation			
- General Fund		(67,736)	(831,143)
Surplus for the year			
- Public Medical Education Foundation Fund		1	225
- HKMA China Relief Fund		-	84
Adjustments for:			
Interest income		(553,267)	(997,595)
Depreciation and amortisation expenses		667,291	669,436
Dividend income		(289,415)	(1,333,041)
Loss on disposal of financial assets at fair value through other comprehensive income		17,886	-
Operating deficit before working capital and fund changes		(225,240)	(2,492,034)
Decrease/(increase) in inventories		482,088	(561,665)
(Increase)/decrease in sundry receivables and prepayments		(1,503,463)	263,483
Increase in utility and other deposits		(30,970)	(7,648)
(Decrease)/Increase in receipts in advance, sundry payables and accruals		(221,663)	5,867,696
Decrease in amount due to a related company		(104)	(105)
NET CASH (USED IN)/GENERATED FROM OPERATING ACTIVITIES		(1,499,352)	3,069,727
CASH FLOWS FROM INVESTING ACTIVITIES			
Proceeds from financial assets at fair value through other comprehensive income		8,728,393	-
Purchase of financial assets at fair value through other comprehensive income		(5,540,000)	-
Dividend received		289,415	412,836
Acquisition of property, plant and equipment		(147,326)	(178,314)
Interest received		553,267	997,595
Decrease in time deposits with maturity more than 3 months at acquisition		29,702,671	183,863
NET CASH GENERATED FROM INVESTING ACTIVITIES		33,586,420	1,415,980
NET INCREASE IN CASH AND CASH EQUIVALENTS		32,087,068	4,485,707
CASH AND CASH EQUIVALENTS AT BEGINNING OF YEAR		21,486,381	17,000,674
CASH AND CASH EQUIVALENTS AT END OF YEAR		53,573,449	21,486,381
ANALYSIS OF THE BALANCES OF CASH AND CASH EQUIVALENTS			
Cash and bank balances	9	53,573,449	21,486,381

NOTES ON THE FINANCIAL STATEMENTS

1. STATUS OF THE ASSOCIATION

The Hong Kong Medical Association (“the Association”) was incorporated in Hong Kong on 15 June 1960 as a company limited by guarantee incorporated in Hong Kong. Every member of the Association undertakes to contribute, if required, an amount not exceeding HK\$20, to the assets of the Association in the event of its being wound up. The address of the Association’s registered office is 5/F., Duke of Windsor Social Service Building, 15 Hennessy Road, Hong Kong.

The Association is engaged in the promotion of the welfare and the protection of the lawful interests of the medical profession.

The financial statements are presented in Hong Kong dollars which is the same as the functional currency of the Association.

2. CHANGES IN ACCOUNTING POLICIES

The Hong Kong Institute of Certified Public Accountants (HKICPA) has issued a new and a number of amendments to Hong Kong Financial Reporting Standards (HKFRSs) that are first effective for the current accounting period of the Association. The Association consider these standards, amendments and interpretations have no material impact on the Association’s financial statements.

The Association has not applied any new standard or interpretation that is not yet effective for the current accounting period (see note 28).

3. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The principal accounting policies applied in the preparation of these financial statements are set out below. These policies have been consistently applied to all the periods presented, unless otherwise stated.

a) Basis of preparation:

These financial statements have been prepared in accordance with all applicable Hong Kong Financial Reporting Standards (which includes all applicable Hong Kong Accounting Standards) issued by the Hong Kong Institute of Certified Public Accountants and accounting principles generally accepted in Hong Kong and the Hong Kong Companies Ordinance. They have been prepared under historical cost convention, except for financial asset at fair value through other comprehensive income, which have been measured at fair value.

b) Foreign currency translation:

- i) Functional and presentation currency
Items included in the financial statements are measured using the currency of the primary economic environment in which the Association operates (“the functional currency”). The financial statements are presented in Hong Kong dollars, which is the Association’s functional and presentation currency.
- ii) Transactions and balances
Foreign currency transactions are translated into the functional currency using the exchange rates prevailing at the dates of the transactions. Foreign exchange gains and losses resulting from the settlement of such transactions and from the translation at period-end exchange rates of monetary assets and liabilities denominated in foreign currencies are recognised in the statement of comprehensive income.

c) Property, plant and equipment:

Property, plant and equipment are stated at cost less accumulated depreciation and accumulated impairment losses. The cost of an asset comprises its purchase price and any directly attributable costs of bringing the asset to its working condition and location for its intended use. Expenditure incurred after the property, plant and equipment have been put into operation, such as repairs and maintenance, is normally charged to the statement of comprehensive income in the period in which it is incurred. In situations where it can be clearly demonstrated that the expenditure has resulted in an increase in the future economic benefits expected to be obtained from the use of the property, plant and equipment, the expenditure is capitalized as an additional cost of that asset.

Depreciation on property, plant and equipment is calculated on the straight-line basis to write off the cost over their estimated useful lives and after taking into account their estimated residue values, where appropriate, as follows:

Leasehold land and building/building	over the remaining unexpired terms of the leases
Furniture and fixtures	10% per annum
Computer equipment	10% per annum

The assets’ residual values and useful lives are reviewed, and adjusted if appropriate, at the end of each reporting period. An asset’s carrying amount is written down immediately to its recoverable amount if the asset’s carrying amount is greater than its estimated recoverable amount.

3. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONT'D)

d) Investment property:

Investment property, which is property held to earn rentals and/or for capital appreciation, is stated at cost less accumulated depreciation and any accumulated impairment loss. Depreciation is provided to write off the cost of investment property using the straight-line method over the remaining terms of the lease.

e) Impairment of assets:

i) Impairment of non-financial assets

At the end of each reporting period, an assessment is made of whether there is any indication of impairment of any asset, or whether there is any indication that an impairment loss previously recognised for an asset in prior years may no longer exist or may have decreased. If any such indication exists, the asset's recoverable amount is estimated. An impairment loss is recognised whenever the carrying amount of an asset or its cash-generating unit exceeds its recoverable amount.

A previously recognised impairment loss is reversed if there has been a change in the estimates used to determine the recoverable amount for the asset, however not to an amount higher than the carrying amount that would have been determined (net of any depreciation), had no impairment loss been recognised in prior years.

ii) Credit losses and impairment of financial assets:

The Association recognises a loss allowance for expected credit losses ("ECLs") on financial assets measured at amortised cost (including accounts receivable).

ECLs are a probability-weighted estimate of credit losses. Credit losses are measured as the present value of all expected cash shortfalls (i.e. the difference between the cash flows due to the company in accordance with the contract and the cash flows that the Association expects to receive).

Loss allowances for receivables are always measured at an amount equal to lifetime ECLs based on the Association's historical credit loss experience, adjusted for factors that are specific to debtors and the current and forecast general economic conditions at the end of the reporting period.

Lifetime ECLs are losses that are expected to result from all possible default events over the expected lives of the financial assets.

f) Inventories:

Inventories comprise publications, souvenir and beverage held for sale and are stated at the lower of cost and net realisable value. Costs, which comprises all cost of purchase and, where applicable, costs of conversion and other costs that have incurred in bringing the inventories to their present location and condition, is calculated on the first in first out basis. Net realisable value is determined on the basis of anticipated sales proceeds less estimated selling expenses.

g) Receivables:

A receivable is recognised when the Association has an unconditional right to receive consideration. A right to receive consideration is unconditional if only the passage of time is required before payment of that consideration is due. If revenue has been recognised before the Association has an unconditional right to receive consideration, the amount is presented as a contract asset (see note 3(r)).

Receivables are stated at amortised cost using the effective interest method less allowance for credit losses (see note 3(e)(ii)).

h) Payables:

Payables are initially measured at fair value and, after initial recognition, at amortised cost, except for short-term payables with no stated interest rate and the effect of discounting being immaterial, that are measured at their original invoice amount.

i) Cash and cash equivalents:

For the purpose of the statement of cash flows, cash and cash equivalents comprise cash on hand and demand deposits, and short term highly liquid investments which are readily convertible into known amounts of cash and which are subject to an insignificant risk of changes in value, and have a short maturity of generally within three months when acquired, less bank overdrafts which are repayable on demand and form an integral part of the Association's cash management.

j) Designated donations/contributions and related expenditures:

Designated donations/contributions received are credited directly to the respective funds. Expenditures are charged to these funds where appropriate.

NOTES ON THE FINANCIAL STATEMENTS

3. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONT'D)

k) **Deferred income tax:**

Deferred income tax is provided in full, using the liability method, on temporary differences arising between the tax bases of assets and liabilities and their carrying amounts in the financial statements. Deferred income tax is determined using tax rates (and laws) that have been enacted or substantially enacted by the end of the reporting period and are expected to apply when the related deferred income tax asset is realized or the deferred income tax liability is settled.

Deferred income tax assets are recognised to the extent that it is probable that future taxable profit will be available against which the temporary differences can be utilized.

l) **Investments in equity instruments:**

Investments in equity securities are recognised and derecognised on the date when the Association commits to purchase or sell the investments. The investments are initially stated at fair value plus transaction costs. These investments are subsequently accounted for as follows:

An investment in equity instrument is classified as fair value through profit or loss (FVTPL) unless they are not held for trading purposes, on initial recognition of the investment, the group makes an election to designate the investment at FVOCI (non-recycling). When the investment is derecognised, the changes in fair value accumulated in fair value reserve is transferred to general fund and not recycled through surplus or deficit.

m) **Operating leases:**

Leases in which a significant portion of the risks and rewards of ownership are retained by the lessor are classified as operating leases. Payments made under operating leases (net of any incentives received from the lessor) are charged or credited to the statement of comprehensive income on a straight-line basis over the period of the lease.

n) **Revenue:**

Donation income is recognised on a cash received basis.

Rental income is recognised in the year on a straight-line basis over the lease terms.

Dividend received from listed investments is recognised when the right to receive payment is established.

Interest income is recognised as it accrues using the effective interest method.

The recognition of revenue from contracts with customers is based on the performance obligations identified in the contracts. Revenue is recognised when (or as) the Association satisfies a performance obligation by transferring a promised good or service (i.e. an asset) to a customer who obtains the control of the asset:

- i) Membership and subscription fees are recognised over time on a straight-line basis over the subscription period as the customers simultaneously receive and consume the benefits of goods or services provided by the Association.
- ii) Entrance fees are recognised at a point in time on approved of status to the applicants.
- iii) Admission fees income are recognised when the related functions are performed.
- iv) Advertisement income is recognised when the related advertisements have been published.
- v) Sales of wine, beverages, food and souvenirs are recognised at a point in time when the delivery is made.
- vi) Retention fees on sales of food are recognised when related sales are recognised.
- vii) Commission and administration fee income are recognised in the year in which the services are rendered.
- viii) Income from seminars courses and activities is recognised over time as the services are rendered.

o) **Related parties:**

a) A person, or a close member of that person's family, is related to the Association if that person:

- i) has control or joint control over the Association;
- ii) has significant influence over the Association; or
- iii) is a member of the key management personnel of the Association or the Association's parents.

b) An entity is related to the Association if any of the following conditions applies:

- i) the entity and the Association are members of the same group (which means that each parent, subsidiary and fellow subsidiary is related to the others).
- ii) one entity is an associate or joint venture of the other entity (or an associate or joint venture of a member of a group of which the other entity is a member).
- iii) both entities are joint ventures of the same third party.
- iv) one entity is a joint venture of a third entity and the other entity is an associate of the third entity.
- v) the entity is a post-employment benefit plan for the benefit of employees of either the Association or an entity related to the Association.
- vi) the entity is controlled or jointly controlled by a person identified in (a).

3. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONT'D)

o) Related parties: (cont'd)

- b) An entity is related to the Association if any of the following conditions applies: (cont'd)
- vii) a person identified in (a)(i) has significant influence over the entity or is a member of the key management personnel of the entity (or of a parent of the entity).
 - viii) the entity, or any member of a group of which it is a part, provides key management personnel services to the group or to the group's parent.

Close members of the family of a person are those family members who may be expected to influence, or be influenced by, that person in their dealings with the entity.

p) Employee benefits:

Salaries, annual leave and other costs of non-monetary benefits are accrued and recognised as an expense in the year in which the associated services are rendered by employees of the Association.

The Association's contributions to the mandatory provident fund scheme and the defined contribution retirement scheme are expensed as incurred. Contributions to the defined contribution retirement scheme are reduced by contributions forfeited by those employees who leave the scheme prior to vesting fully in the contributions. The assets of both schemes are held separately from those of the Association in independently administered funds.

q) Provisions:

A provision is recognised when a present obligation (legal or constructive) has arisen as a result of a past event and it is probable that a future outflow of resources will be required to settle the obligation, provided that a reliable estimate can be made of the amount of the obligation.

When the effect of discounting is material, the amount recognised for a provision is the present value at the end of the reporting period of the future expenditures expected to be required to settle the obligation. The increase in the discounted present value amount arising from the passage of time is included in finance costs in the statement of comprehensive income.

r) Contract assets and contract liabilities:

A contract asset is recognised when the Association recognises revenue (see note 3(n)) before being unconditionally entitled to the consideration under the payment terms set out in the contract. Contract assets are assessed for expected credit losses (ECL) in accordance with the policy set out in note 3(e)(ii) and are reclassified to receivables when the right to the consideration has become unconditional (see note 3(g)).

A contract liability is recognised when the customer pays non-refundable consideration before the Association recognises the related revenue (see note 3(n)). A contract liability would also be recognised if the Association has an unconditional right to receive non-refundable consideration before the Association recognises the related revenue. In such cases, a corresponding receivable would also be recognised (see note 3(g)).

For a single contract with the customer, either a net contract asset or a net contract liability is presented. For multiple contracts, contract assets and contract liabilities of unrelated contracts are not presented on a net basis.

4. CRITICAL ACCOUNTING ESTIMATES AND JUDGEMENTS

Estimates and judgements are continually evaluated and are based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

The Association makes estimates and assumptions concerning the future. The resulting accounting estimates will, by definition, seldom equal the related actual results. The estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year are discussed below.

Useful lives of property, plant and equipment

The Association's management determines the estimated useful lives and related depreciation charges for its property, plant and equipment. This estimate is based on the historical experience of the actual useful lives of property, plant and equipment of similar nature and functions. It could change significantly as a result of technical innovations and competitor actions in response to severe industry cycles. Management will increase the depreciation charge where useful lives are less than previously estimated lives, or it will write-off or write-down technically obsolete or non-strategic assets that have been abandoned or sold.

NOTES ON THE FINANCIAL STATEMENTS

5. PROPERTY, PLANT AND EQUIPMENT

	Leasehold land and building (Note 1)	Building (Note 2)	Furniture and fixtures	Computer equipment	Total
	HK\$	HK\$	HK\$	HK\$	HK\$
Cost:					
At 1.3.2019	8,554,079	563,790	13,374,309	989,246	23,481,424
Additions	-	-	158,926	19,388	178,314
At 29.2.2020 and 1.3.2020	8,554,079	563,790	13,533,235	1,008,634	23,659,738
Additions	-	-	84,946	62,380	147,326
Disposals	-	-	-	(611,015)	(611,015)
At 28.2.2021	8,554,079	563,790	13,618,181	459,999	23,196,049
Accumulated depreciation:					
At 1.3.2019	639,343	254,378	9,337,837	816,805	11,048,363
Charge for the year	9,007	10,921	606,000	39,762	665,690
At 29.2.2020 and 1.3.2020	648,350	265,299	9,943,837	856,567	11,714,053
Charge for the year	9,007	10,921	601,842	41,775	663,545
Written back on disposals	-	-	-	(611,015)	(611,015)
At 28.2.2021	657,357	276,220	10,545,679	287,327	11,766,583
Net book value:					
At 28.2.2021	7,896,722	287,570	3,072,502	172,672	11,429,466
At 29.2.2020	7,905,729	298,491	3,589,398	152,067	11,945,685

Notes:

- 1) The leasehold land and building is held in Hong Kong on long lease and is located at 2nd Floor, The Chinese Club Building, Nos. 21 & 22 Connaught Road Central, Hong Kong.
- 2) The building is situated in Hong Kong at 5th Floor, Duke of Windsor Building, 15 Hennessy Road, Hong Kong.

6. INVESTMENT PROPERTY

	Investment property (Note 1)
	HK\$
Cost:	
At 1.3.2019, 29.2.2020 and at 28.2.2021	83,463
Accumulated depreciation:	
Balance at 1.3.2019	1,400
Charge for the year	100
Balance at 29.2.2020	1,500
Charge for the year	100
Balance at 28.2.2021	1,600
Net book value:	
At 28.2.2021	81,863
At 29.2.2020	81,963

6. INVESTMENT PROPERTY (CONT'D)

Note:

- 1) The investment property is held in Hong Kong on long lease and is located at Flat 1, 6th Floor, Wyndham Mansion, 32 Wyndham Street, Hong Kong.

The investment property is leased to third parties on operating leases. The fair value of the property at 28 February 2021 assessed by the council members is HK\$11,164,183 (2020: HK\$11,164,183) which is based on open market value of similar properties.

Fair value measurement of property

- i) Fair value hierarchy

The following table presents the fair value of the Association's investment property measured at the end of the reporting period on a recurring basis, categorised into the three-level fair value hierarchy as defined in HKFRS 13, *Fair value measurement*. The level into which a fair value measurement is classified is determined with reference to the observability and significance of the inputs used in the valuation technique as follows:

- Level 1 valuations: Fair value measured using only Level 1 inputs i.e. unadjusted quoted prices in active markets for identical assets or liabilities at the measurement date
- Level 2 valuations: Fair value measured using Level 2 inputs i.e. observable inputs which fail to meet Level 1, and not using significant unobservable inputs. Unobservable inputs are inputs for which market data are not available
- Level 3 valuations: Fair value measured using significant unobservable inputs

	Fair value measurements as at 28 February 2021 categorised into				
	Carrying value at 28 February 2021 HK\$	Fair value at 28 February 2021 HK\$	Level 1 HK\$	Level 2 HK\$	Level 3 HK\$
Recurring fair value measurement					
Investment property in Hong Kong	81,863	11,164,183	-	11,164,183	-

	Fair value measurements as at 29 February 2020 categorised into				
	Carrying value at 29 February 2020 HK\$	Fair value at 29 February 2020 HK\$	Level 1 HK\$	Level 2 HK\$	Level 3 HK\$
Recurring fair value measurement					
Investment property in Hong Kong	81,963	11,164,183	-	11,164,183	-

- ii) Valuation techniques and inputs used in Level 2 fair value measurements

The fair value of investment property located in Hong Kong is determined using market comparison approach by reference to recent sales price of comparable properties on a price per square foot basis using market data which is publicly available.

7. PREPAID LEASE PAYMENTS ON LAND USE RIGHTS

The Association's prepaid lease payments on land use rights comprise:

	2021 HK\$	2020 HK\$
Situated in Hong Kong		
Medium-term lease	98,428	102,074
Analysed for reporting purposes as:		
Non-current assets	94,783	98,429
Current assets	3,645	3,645
	98,428	102,074

NOTES ON THE FINANCIAL STATEMENTS

8. FINANCIAL ASSETS AT FAIR VALUE THROUGH OTHER COMPREHENSIVE INCOME (“FVOCI”)

	2021	2020
	HK\$	HK\$
Financial assets designated at FVOCI (non-recycling)		
Listed equity securities in Hong Kong	10,798,745	17,511,378

These investments are designated at FVOCI as they are held for strategic purposes.

9. CASH AND BANK BALANCES

	2021	2020
	HK\$	HK\$
Time deposits at bank	20,838,884	30,317,116
Cash and bank balances	33,349,010	21,486,381
Cash and bank balances in the statement of financial position	54,187,894	51,803,497
Less: Time deposits with original maturity more than three months	(614,445)	(30,317,116)
Cash and cash equivalents in the statement of cash flows	53,573,449	21,486,381

Cash and bank balances include the following amounts denominated in a currency other than the Association’s functional currency, Hong Kong dollars:

	2021		2020	
United States dollars	US\$	233,839	US\$	204,802
Australian dollars	AUD	120,323	AUD	11,738
Renminbi	CNY	11,417,734	CNY	21,455,567

Cash at banks earn interest at floating rates based on daily bank deposit rates. Short term deposits are made for varying periods of no more than three months depending on the immediate cash requirements of the Association, and earn interest at the respective short term time deposit rates.

10. AMOUNT DUE TO A RELATED COMPANY

This amount is unsecured advances which are interest free and have no fixed terms of repayment.

11. MEMBERSHIP AND SUBSCRIPTION FEES AND OTHER INCOME AND NET GAINS

The Association is engaged in the promotion of the welfare and the protection of the lawful interests of the medical profession. Revenues recognised during the year were as follows:

	2021	2020
	HK\$	HK\$
Membership and subscription fees:		
Entrance fees	26,200	9,000
Annual subscriptions	50,650	26,050
Life membership subscriptions	37,000	24,000
	113,850	59,050

11. MEMBERSHIP AND SUBSCRIPTION FEES AND OTHER INCOME AND NET GAINS (CONT'D)

	2021	2020
	HK\$	HK\$
Other income and net gains		
Operating lease rental income from investment property	390,000	405,000
Dividends received from listed financial assets at fair value through other comprehensive income	289,415	1,333,041
Administration fee income	8,000,000	8,000,000
Commission received	145,915	226,023
Bank interest income	553,267	997,595
Surplus from club house – note 14	336,090	1,518,107
Net income from mailing service secretarial charges – note 15	112,567	456,026
CME lecture fee	-	425,550
Surplus on CME Programme for non-specialists – note 16	438,945	141,875
Sundry income	123,069	15,571
Surplus on HKMA Newsletter – note 20	1,055,421	1,972,036
Exchange gain	1,234,077	-
	12,678,766	15,490,824

12. ADMINISTRATIVE AND OTHER OPERATING EXPENSES

	2021	2020
	HK\$	HK\$
Advertising, newspaper and periodicals	70,108	38,766
Annual charity concert expenses	500	69,705
Amortisation of land use rights	3,646	3,646
Awards to medical students	5,000	10,000
Cash coupons to life members	43,700	44,500
Cleaning expenses	43,533	42,141
Club house expenses	529,996	682,949
Computer expenses	278,869	124,011
Community services	31,854	126,040
Conference expenses	-	42,432
Contribution to staff retirement fund	781,236	800,721
Deficits from 100 th Anniversary functions	31,641	73,065
Deficits from annual social functions – note 13	-	11,080
Deficits on CME Bulletin – note 17	125,289	479,378
Deficit from other functions – note 18	144,794	415,183
Deficit on sale of Hong Kong Medical Journal expenses	214,016	208,585
Depreciation on property, plant and equipment	663,545	665,690
Depreciation on investment property	100	100
	663,645	665,790
Donations	10,000	5,000
Exchange loss	-	1,251,950
Gifts	48,655	18,315
Insurance	71,553	64,236
Licence fees	44,072	39,944
Meeting expenses	72,525	222,358
Postage and stamp duties	274,007	188,675
Printing and stationery	221,877	273,822
Professional fees	131,851	244,085
Property expenses – note 19	249,973	133,798
Repairs and renewals	109,745	117,332
Salaries and allowances	7,889,768	9,191,957
Social expenses	18,600	51,801
Staff lunch	198,438	131,288
Subscriptions to other medical associations	51,029	35,271
Sundry expenses	306,630	166,648
Telephone and telegrams	57,766	57,342
Travelling expenses	52,814	65,791
Water and electricity	26,025	54,212
Visit to Chinese Medical Association	39,311	224,790
Lecture and talk expenses	-	4,410
Loss from disposal of financial assets at fair value through other comprehensive income	17,886	-
	12,860,352	16,381,017

NOTES ON THE FINANCIAL STATEMENTS

13. DEFICIT FROM ANNUAL SOCIAL FUNCTIONS

	2021	2020
	HK\$	HK\$
Income		
Donations/sponsorship	-	-
Sales of dinner tickets	-	-
Income from circular/booklet	-	-
Less: Expenditure	-	(11,080)
Deficit for the year	-	(11,080)

14. SURPLUS FROM CLUB HOUSE

	2021	2020
	HK\$	HK\$
Sales of beverages	11,597	71,262
Less: Cost of sales	(5,491)	(7,254)
	6,106	64,008
Retention fees	-	1,419,617
Room rental	120,274	126,731
	126,380	1,610,356
Less: Visa card handling charges and coupon used	(40,290)	(92,249)
	86,090	1,518,107
HKSAR Government Subsidy	250,000	-
Surplus for the year	336,090	1,518,107

15. NET INCOME FROM MAILING SERVICE SECRETARIAL CHARGES

	2021	2020
	HK\$	HK\$
Handling charges	170,923	597,733
Less: Handling fee	(58,356)	(141,707)
Net income	112,567	456,026

16. SURPLUS ON CME PROGRAMME FOR NON-SPECIALISTS

	2021	2020
	HK\$	HK\$
Fees and sponsorship received	811,360	370,452
Less: Expenditure	(372,415)	(228,577)
Surplus for the year	438,945	141,875

17. DEFICIT ON CME BULLETIN

	2021	2020
	HK\$	HK\$
Advertisement fee received	781,914	532,538
Less: Expenditure	(907,203)	(1,011,916)
Deficit for the year	(125,289)	(479,378)

18. DEFICIT FROM OTHER FUNCTIONS

	2021	2020
	HK\$	HK\$
Fees and donations received	49,622	343,772
Less: Expenditure	(194,416)	(758,955)
Deficit for the year	(144,794)	(415,183)

19. PROPERTY EXPENSES

	2021	2020
	HK\$	HK\$
Building management fee	29,814	41,040
Rates and government rent	11,836	18,537
Repairs and maintenance	208,323	74,221
	249,973	133,798

20. SURPLUS ON HKMA NEWSLETTER

	2021	2020
	HK\$	HK\$
Advertising income	2,144,394	3,118,980
Less: Expenditure	(1,088,973)	(1,146,944)
Surplus for the year	1,055,421	1,972,036

21. COUNCIL MEMBERS' REMUNERATION: HK\$Nil (2020: HK\$Nil).

22. TAXATION

- i) No provision for Hong Kong profits tax has been made in these financial statements as the Association sustained a loss for tax purpose for the years ended 28 February 2021 and 29 February 2020.
- ii) The income tax expense for the year can be reconciled to the deficit before taxation per the statement of comprehensive income as follows:

	2021	2020
	HK\$	HK\$
Deficit before taxation	(67,736)	(831,143)
Tax calculated at normal income tax rate of 16.5% (2020: 16.5%)	(11,176)	(137,139)
Tax effect on non-taxable income	(383,915)	(384,555)
Tax effect on non-deductible expenses	3,776	215,322
Tax effect on temporary differences not recognised	(43,912)	(51,188)
Tax loss unrecognised	435,227	357,560
Income tax expense for the year	-	-

- iii) Provision for deferred tax has not been provided in the financial statements as the effect of all temporary differences is not material.

At the end of the reporting period, the Association has unused tax losses of HK\$17,627,750 (2020: HK\$14,990,007) available for offset against future profits. No deferred tax assets has been recognised in respect of such losses due to the unpredictability of future profits streams.

NOTES ON THE FINANCIAL STATEMENTS

23. FUNDS

The amounts of the Association's funds and the movements therein for the current and prior years are presented in the statement of changes in funds on page 68 of the financial statements.

Note: According to a Special Resolution passed on 21 July, 2005, it was resolved that the annual surplus of the Association be transferred to a special account and that when the balance of this special account is sufficient to offset the subscriptions receivable for the following year, an amount equivalent to the subscriptions receivable in that year be transferred from this account to the Annual Subscription account of the relevant year.

The amount of HK\$4,089,864 (2020: HK\$3,171,657) which is included in general fund transferred to special fund and represents as follows:

Annual surplus transferred:

	HK\$
Net surplus for the year ended 28 February 2021	4,089,864

24. OPERATING LEASE ARRANGEMENT

The Association leases its investment property under operating lease arrangement. At the end of the reporting period, the Association had total future minimum lease rental receivable under non-cancellable operating lease falling due as follows:

	2021 HK\$	2020 HK\$
- within 1 year	270,000	396,000
- After 1 year but within 2 years	-	297,000
	270,000	693,000

25. FINANCIAL INSTRUMENTS

25A. CATEGORIES OF FINANCIAL INSTRUMENTS

	Financial assets at amortised cost HK\$	2021 Financial assets of fair value through other comprehensive income HK\$	Total HK\$
Financial assets			
Financial asset at fair value through other comprehensive income	-	10,798,745	10,798,745
Utility and other deposits	176,687	-	176,687
Sundry receivables	2,772,114	-	2,772,114
Cash and bank balances	54,187,894	-	54,187,894
	57,136,695	10,798,745	67,935,440
			Financial liabilities at amortised cost HK\$
Financial liabilities			
Amount due to a related company			1,176
Sundry payables and accruals			44,738,284
			44,739,460

25. FINANCIAL INSTRUMENTS (CONT'D)

25A. CATEGORIES OF FINANCIAL INSTRUMENTS (CONT'D)

	2020		Total HK\$
	Financial assets at amortised cost HK\$	Financial assets of fair value through other comprehensive income HK\$	
Financial assets			
Financial asset at fair value through other comprehensive income	-	17,511,378	17,511,378
Utility and other deposits	145,717	-	145,717
Sundry receivables	1,628,067	-	1,628,067
Cash and bank balances	51,803,497	-	51,803,497
	53,577,281	17,511,378	71,088,659
			Financial liabilities at amortised cost HK\$
Financial liabilities			
Amount due to a related company			1,280
Sundry payables and accruals			44,959,947
			44,961,227

25B. FINANCIAL RISK MANAGEMENT AND FAIR VALUE ESTIMATION

The main risks arising from the Association's financial instruments are interest rate risk and credit risk and liquidity risk. The Council members reviews and agrees to policies for managing each of these risks and they are summarised below:

a) Financial risk factors:

1) Foreign currency risk

The Association is exposed to foreign exchange risk arising from United States dollars and Renminbi ("RMB") exposure. Foreign exchange risk mainly arises from the Association's recognised assets as disclosure in note (9).

Hong Kong dollars are pegged to the United States dollars and the foreign exchange exposure between them are considered limited.

HKD/RMB fluctuated from 1.117 to 1.1537 during the year ended 28 February 2021, resulting in an exchange gain of HK\$1,234,077 (see note 11) (2020: Exchange loss of HK\$1,251,950 (see note 12)).

Sensitivity analysis

As at 28 February 2021, it is estimated that a general increase/decrease of 5 percent in CNY, with all other variables held constant, would decrease/increase the Association's deficit for the year by approximately HK\$658,632 (2020: HK\$ HK\$1,198,275).

The sensitivity analysis has been determined assuming that the change in foreign exchange rates had occurred at the end of the reporting period and had been applied to the Association's exposure to currency risk for both derivative and non-derivative financial instruments in existence at that date, and that all other variables, in particular interest rates, remain constant.

The stated changes represent management's assessment of reasonably possible changes in foreign exchange rates over the period until the end of next annual reporting period. In this respect it is assumed that the pegged rate between the Hong Kong dollar and the United States dollar would be materially unaffected by any changes in movement in value of the United States dollar against other currencies. The analysis is performed on the same basis for 2020.

NOTES ON THE FINANCIAL STATEMENTS

25. FINANCIAL INSTRUMENTS (CONT'D)

25B. FINANCIAL RISK MANAGEMENT AND FAIR VALUE ESTIMATION (CONT'D)

a) Financial risk factors: (cont'd)

2) Credit risk

The Association's maximum exposure to credit risks in the event of the counterparties failure to perform their obligations as at 28 February 2021 in relation to each class of recognised financial assets is the carrying amount of those assets as stated in the statement of financial position.

As at 28 February 2021 and 29 February 2020, the financial assets of the Association that were exposed to credit risk and their maximum exposure were as follows:

	2021		2020	
	Carrying amount in the statement of financial position HK\$	Maximum exposure to credit risk HK\$	Carrying amount in the statement of financial position HK\$	Maximum exposure to credit risk HK\$
Financial assets				
Utility and other deposits	176,687	176,687	145,717	145,717
Sundry receivables	2,772,114	2,772,114	1,628,067	1,628,067
Cash and bank balances	54,187,894	54,187,894	51,803,497	51,803,497
	57,136,695	57,136,695	53,577,281	53,577,281

The credit risk on liquid funds is limited because the counterparties are banks with high credit-ratings.

The Association performs individual evaluations on all customers based on the customer's past payment history when due, and take into account information specific to the customers as well as pertaining to the economic environment in which the customer operates. Based on experience, existing market conditions as well as forward looking estimates, management is of the opinion that no charge for impairment is necessary in respect of these balances as there has not been a significant change in credit quality of these parties and the balances are still considered fully recoverable. The Association does not hold any collateral over these balances.

3) Liquidity risk

The Association's policy is to regularly monitor its liquidity requirements to ensure that it maintains sufficient reserve of cash to meet its liquidity requirements in the short and longer terms.

The following table details the remaining contractual maturities at the end of the reporting period of the Association's financial liabilities, which are based on contractual undiscounted cash flows and the earliest date the Association can be required to pay:

	2021		
	Carrying amount HK\$	Total contractual undiscounted cash flow HK\$	Within 1 year or on demand HK\$
Current liabilities			
Amount due from a related company	1,176	(1,176)	(1,176)
Sundry payables and accruals	44,738,284	(44,738,284)	(44,738,284)
	44,739,460	(44,739,460)	(44,739,460)

25. FINANCIAL INSTRUMENTS (CONT'D)

25B. FINANCIAL RISK MANAGEMENT AND FAIR VALUE ESTIMATION (CONT'D)

a) Financial risk factors: (cont'd)

3) Liquidity risk (cont'd)

	2020		
	Carrying amount	Total contractual undiscounted cash flow	Within 1 year or on demand
	HK\$	HK\$	HK\$
Current liabilities			
Amount due from a related company	1,280	(1,280)	(1,280)
Sundry payables and accruals	44,959,947	(44,959,947)	(44,959,947)
	44,961,227	(44,961,227)	(44,961,227)

4) Price risk

The Association is exposed to equity security price risk on fair value through other comprehensive income. The fair value adjustment will be affected either positively or negatively, amongst others, by the changes in stock price. The Association's equity price risk is mainly concentrated on equity instruments quoted in the Stock Exchange in Hong Kong. The management manages the exposure to price risk by maintaining a portfolio of investments with different risk and return profiles.

Sensitivity analysis

The sensitivity analyses below have been determined based on the exposure to funds price risks at the end of the reporting period.

The following denominates the sensitivity to every 5% change in the fair values of listed equity securities classified as fair value through other comprehensive income with all other variable held constant and before any impact on tax, based on their carrying amounts at the end of the reporting period.

- Fair value reserve of the Association for the year would increase/decrease by HK\$539,937 (2020: HK\$875,569).

b) Fair value:

i) Financial assets and liabilities measured at fair value

The following table presents fair value of Association's financial instruments measured at the end of the reporting period on a recurring basis, categorised into the three-levels fair value hierarchy as defined in HKFRS 13, *Fair value measurement*. The level into which a fair value measurement is classified is determined with reference to the observability and significance of the inputs used in the valuation technique as follows:

- Level 1 valuation: fair values measured using only level 1 inputs i.e. unadjusted quoted prices in active markets for identical assets or liabilities at measurement date.
- Level 2 valuation: fair values measured using Level 2 inputs i.e. observable inputs which fail to meet Level 1 and not using significant unobservable inputs. Unobservable inputs are inputs for which market data are not available.
- Level 3 valuation: fair values measured using significant unobservable inputs.

	Fair value measurements as at 28 February			Total fair value at 28 February	Valuation technique and key input
	Level 1	Level 2	Level 3		
	HK\$	HK\$	HK\$	HK\$	
2021 Assets					
Financial assets at FVOCI	10,798,745	-	-	10,798,745	Quoted bid price in an active market

NOTES ON THE FINANCIAL STATEMENTS

25. FINANCIAL INSTRUMENTS (CONT'D)

25B. FINANCIAL RISK MANAGEMENT AND FAIR VALUE ESTIMATION (CONT'D)

b) Fair value: (cont'd)

i) Financial assets and liabilities measured at fair value (cont'd)

	Fair value measurements as at 29 February			Total fair value at 29 February HK\$	Valuation technique and key input
	Level 1 HK\$	Level 2 HK\$	Level 3 HK\$		
2020 Assets					
Financial assets at FVOCI	17,511,378	-	-	17,511,378	Quoted bid price in an active market

During the year, there were no significant transfers between instruments in Level 1 and Level 2.

ii) Fair values of financial instruments carried at other than fair value

The council members consider that all of the other financial assets and liabilities are carried at amounts not materially different from their fair values as at 28 February 2021 and 29 February 2020.

26. RELATED PARTY TRANSACTIONS

- Key management personnel compensation: HK\$Nil (2020: HK\$Nil).
- Details of balance with a related company are set out in note 10 on the financial statements.

27. FUND MANAGEMENT

The Association's objectives when managing fund are:

- To safeguard the Association's ability to continue as a going concern, so that it continues to provide benefit for members;
- To support the Association's stability and growth; and
- To provide fund for the purpose of strengthening the Association's risk management capability.

The Association actively and regularly reviews and manages its fund structure to ensure optimal fund structure, taking into consideration the future fund requirements of the Association and prevailing and projected profitability and projected operating cash flows. Details of movements in funds are set out in note 23 on the financial statements.

28. POSSIBLE IMPACT OF AMENDMENTS, NEW STANDARDS AND INTERPRETATIONS ISSUED BUT NOT YET EFFECTIVE FOR THE YEAR ENDED 28 FEBRUARY 2021

Up to the date of issue of these financial statements, the Hong Kong Institute of Certified Public Accountants has issued a number of amendments, new standards and interpretations which are not yet effective for the year ended 28 February 2021 and which have not been adopted in these financial statements.

The Association is in the process of making an assessment of what the impact of these amendments, new standards and new interpretations is expected to be in the period of initial application. So far it has concluded that the adoption of them is unlikely to have a significant impact on the Association's financial performance and position.

香港醫學會

一九二零年成立
一九六零年註冊
擔保有限公司檔案編號 6030

亞洲及大洋洲醫學聯會
世界醫學會
會員

香港醫學組織聯會
創會會員

聯繫機構
香港醫學會慈善基金
二零零六年成立及註冊

The Hong Kong Medical Association

Founded in 1920
Incorporated in 1960
A company limited by guarantee Companies Registry File No. 6030

Member of
Confederation of Medical Associations in Asia & Oceania
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