

## Proposal for the Introduction of A New Clinical Procedure / Technology / Treatment

<b>Section A – Details of the Medical Practitioners</b>	
Name:	_____
Job Title:	_____
Speciality:	_____

<b>Section B – Details of New Procedure / Technology/ Treatment</b>
Brief description of Procedure / Technology/ Treatment:
Evidence Base:
Risk and Benefits:
Risk Assessment of most common complications :
Management plan in the event of complications including financial liability :
For Medical Equipment: Registration with CE ? Yes <input type="checkbox"/> No <input type="checkbox"/> Registration with USFDA ? Yes <input type="checkbox"/> No <input type="checkbox"/>
Who is to undertake this Procedure/ Technology/ Treatment?

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What evidence do you have that these individuals are competent to undertake this Procedure/  
Technology/ Treatment?

What patient information will be provided?

What are the drug prescribing requirements in relation to this procedure?

Suggested patient charges:

Is the technology being used in Hong Kong public hospital(s)? Yes  No

Hospital name(s):

## Section C - Approval

### Chief of Specialty

Approval Yes  No

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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**Chairman of the Clinical Effectiveness and Technology Management Committee**

Approval      Yes       No

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Chief Operating Officer**

Approval      Yes       No

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Chief Executive Officer**

Approval      Yes       No

Signature: \_\_\_\_\_

Date: \_\_\_\_\_