

Information on Human Papillomavirus (HPV) Vaccines

人類乳頭瘤病毒(HPV)疫苗的資料

Please read the information carefully. If you have any concerns about the suitability of your child or yourself for the vaccination, please consult your family doctor.

1. What is HPV?

Human Papillomavirus (HPV) is the name of a group of viruses that includes more than 150 types. Around 40 of these viruses infect the genital area of men and women. HPV can cause premalignant changes and malignant cancers of cervix, vagina, vulva and anus.

2. What is HPV vaccine?

Human Papillomavirus (HPV) vaccine (also named as cervical cancer vaccine) is a prophylactic vaccine to prevent cervical cancer as well as other HPV-related cancers and diseases. In Hong Kong, about 90% of cases of cervical cancer were caused by persistent infection with high-risk HPV-16, 18, 31, 33, 45, 52 and 58. All the above seven HPV types are included in the 9-valent HPV vaccine.

3. How many doses of HPV vaccine are recommended?

Persons initiating vaccination ages 9 through 14 years, except immunocompromised persons: Two doses courses 0, 6-12 months. Persons initiating vaccination at age 15 and older, and immunocompromised persons initiating vaccination at ages 9 and older: Three doses 0, 2, 6 months.

4. Who should not receive HPV vaccine?

People with the following conditions:

- Serious allergic reaction to any of the vaccine component, or following a previous dose of HPV vaccine
- Aged below 9 years
- Pregnancy

請仔細閱讀資料。如你對你的子女或你本人是否適宜接種 **HPV** 疫苗有任何疑問，可先諮詢家庭醫生意見。

1. 甚麼是人類乳頭瘤病毒？

人類乳頭瘤病毒（又稱 HPV）是一組包括 150 多種類型的病毒，其中約 40 種會感染人類的生殖器官。HPV 可引致子宮頸、陰道、外陰及肛門的癌前病變及癌症。

2. 甚麼是人類乳頭瘤病毒疫苗？

人類乳頭瘤病毒疫苗（簡稱 HPV 疫苗，又稱子宮頸癌疫苗）是一種預防性疫苗，能預防子宮頸癌及其他因感染 HPV 而引致的癌症和疾病。在香港，約九成的子宮頸癌是由 HPV-16, 18, 31, 33, 45, 52, 58 型病毒感染而引起。九價人類乳頭瘤病毒疫苗能覆蓋以上七種 HPV 基因型。

3. 建議接種多少劑 HPV 疫苗？

9 至 14 歲接種疫苗人士（免疫功能低人士除外）：需接種兩劑疫苗，而兩劑疫苗接種時間需相隔 6-12 個月。

15 歲或以上人士及 9 歲或以上（免疫功能低人士），需接種三劑疫苗，而三劑疫苗的接種時間應在第 0, 2 及 6 個月。

4. 誰不直接種 HPV 疫苗？有下列情況的人士：

- 對子宮頸癌疫苗或其成份曾有嚴重的過敏反應
- 九歲以下
- 懷孕

- Severe allergic reaction to yeast (used in baking bread)

5. What should be noted before immunisation?

Vaccination should be postponed in individuals suffering from an acute severe febrile illness. However, the presence of a minor illness, such as symptoms of mild upper respiratory tract infection (common cold, cough etc.), is not a contraindication for immunisation. Currently there is no adequate scientific evidence to show an additional benefit of receiving 9-valent HPV vaccine for those who have completed vaccination with 2-valent or 4valent HPV vaccine. Therefore, no further 9-valent vaccine would be offered for these individuals.

6. What are the possible reactions after immunisation?

HPV vaccines are generally safe. Most people do not have serious reactions after receiving HPV vaccination. Common side effects are similar to those from other vaccinations, such as:

- Mild and short-lasting side effects, including headache, dizziness, nausea and fatigue
- Soreness, redness or swelling at the injection site
- Fever

- 對酵母 (製麵包的其中一種材料) 曾有嚴重過敏反應

5. 接種 HPV 疫苗前有甚麼注意事項？

在疫苗接種當日有輕微不適，如上呼吸道感染徵狀 (傷風、咳嗽等)，是可以接種此疫苗的。但如果有發燒或病情較重，則應於痊癒後才接種疫苗。現時沒有足夠科學證據顯示在完成接種 2 價或 4 價 HPV 疫苗後接種 9 價 HPV 疫苗有額外的益處。因此，這些人士不會攞安排再接種 9 價 HPV 疫苗。

6. 接種 HPV 疫苗後可能會出現甚麼反應？

一般而言，HPV 疫苗是安全的，大多數人士在接種此疫苗後，都不會有嚴重反應。常見的副作用與其他疫苗相似，包括：

- 輕微而短暫情況，包括頭痛、頭暈、噁心、疲倦
- 接種部位疼痛或紅腫
- 發燒

Electronic Health Record Sharing System (eHealth)

電子健康紀錄互通系統(醫健通)

The Electronic Health Record Sharing System (eHealth) is a territory-wide, patient-oriented electronic sharing platform which enables authorised healthcare providing organisations in the public and private sectors to access and share participating patients' electronic health records (eHR) for healthcare purposes. After joining eHealth, the Hospital Authority (HA), the Department of Health (DH) and individual private healthcare providers authorised by you can access your eHR on a need-to-know basis in the course of providing healthcare to enable more timely diagnosis and treatment, and reduce duplicate diagnostic tests. Joining eHealth is voluntary and free of charge. You can withdraw from eHealth or revoke any sharing consent given to a healthcare provider (other than HA and DH) anytime. Citizens can view the vaccination records by using eHealth mobile application after registering eHealth.

電子健康紀錄互通系統（醫健通）是全港性、以病人為本的電子互通平台，讓獲授權的公私營醫護機構取覽和互通參與病人的電子健康紀錄作醫護用途。登記加入醫健通後，醫院管理局（醫管局）、衛生署及個別獲你授權的私營醫護機構可於提供醫護服務時按「有需要知道」的原則取覽你的電子健康紀錄，以能為你提供更適時的診斷及治療，並減省重複檢驗。參與醫健通屬自願性質，費用全免，你可隨時退出醫健通或撤銷給予任何醫護機構（醫管局和衛生署除外）的授權。登記醫健通後市民可使用醫健通流動應用程式查閱疫苗接種紀錄。

Please scan the QR codes to read and understand the "Participant Information Notice" and "Personal Information Collection Statement". 請掃描二維碼以參閱及明白參與者須知及收集個人資料聲明。

Participant Information Notice

參與者須知



Personal Information Collection Statement

收集個人資料聲明



If you have any enquiry about eHealth registration or other related matters, please contact eHR Registration Office (Hotline: 3467 6300).

Please also visit website: www.ehealth.gov.hk for more details about eHealth.

如你有任何關於醫健通登記及其他事項查詢，請聯絡電子健康紀錄申請及諮詢中心(熱線: 3467 6300)。你亦可了解更多有關醫健通的詳情，請瀏覽網站 www.ehealth.gov.hk。

Part II 【Consent of Vaccination】**第二部分【接種同意書】****1. CONSENT TO ADMINISTRATION OF HPV VACCINATION 接種同意書** **CONSENT 同意**

I have read and understood this document and the attached information on HPV Vaccines and Collection of Personal Data - Statement of Purposes, including persons/ conditions not suitable for receiving HPV vaccine, and **AGREE** for myself/ my child/ ward* to receive the HPV vaccine (1st/ 2nd/ 3rd dose)

I agree for myself/ my child/ ward* to register eHealth if the vaccine recipient has not yet registered. If verification shows that she has not yet registered, the vaccine recipient/ parents/ guardian agrees to provide further information of the vaccine recipient to WWS and consent for eHealth registration of the vaccine recipient.

本人已閱讀及明白本檔及隨附有關人類乳頭瘤病毒(HPV)疫苗的資料及收集個人資料的用途聲明，包括不宜接種人類乳頭瘤病毒(HPV)疫苗的人士/ 情況，及 **同意** 本人/ 小女/ 受監護者* 接種人類乳頭瘤病毒疫苗 (第一劑/ 第二劑/ 第三劑)。如疫苗接種者並未登記醫健通，本人/ 小女/ 受監護者*同意登記醫健通。若經核證後發現疫苗接種者並未登記醫健通，疫苗接種者/ 家長/ 監護人同意向樂妍站提供疫苗接種者的進一步資料及同意疫苗接種者登記醫健通。

Signature of Vaccine Recipient/ Parents/ Guardian*: 疫苗接種者/ 家長/ 監護人*簽署：	Relationship with Vaccine Recipient 與疫苗接種者關係： <input type="checkbox"/> Father 父 <input type="checkbox"/> Mother 母 <input type="checkbox"/> Guardian 監護人
Name of Vaccine Recipient/ Parents/ Guardian*: 疫苗接種者/ 家長/ 監護人*姓名：	Contact Number: 聯絡電話：
Date of Signature: 簽署日期：	

Part III 【Registration of eHealth】**第三部分【登記醫健通】**

The following part is ONLY applicable to those who have not registered eHealth 下列部分僅供未登記醫健通人士填寫

I have read and understood the “Participant Information Notice” and “Personal Information Collection Statement” of eHealth and I/ on behalf of the healthcare recipient (HCR) **AGREE to register with eHealth, which enables authorised healthcare providers to access and share the HCR’s eHealth records for healthcare purposes.**

本人已閱讀及明白醫健通的「參與者須知」及「收集個人資料聲明」，及 **同意** 本人/ 代表醫護接受者登記參加醫健通，讓獲授權的醫護機構取覽及互通醫護接受者於醫健通的紀錄作醫護用途。

Completed and signed by vaccine recipient aged 16 or above 由 16 歲或以上 疫苗接種者填寫及簽署

Signature of Vaccine Recipient: 疫苗接種者簽署：	Mobile Number for receiving system notifications: 手提電話號碼以收取系統通知：	Date of Signature 簽署日期：	
Completed and signed by Substitute Decision Maker (SDM) (i.e. parent or guardian) (Only applicable to vaccine recipient aged under 16/ aged 16 or above but incapable of giving consent) 由代決人（即家長或監護人）填寫及簽署（只適用於十六歲以下兒童/ 年滿十六歲但無能力自行給予同意的人士）			
SDM's Surname in English: 代決人英文姓氏：	SDM's Given Name in English: 代決人英文名：	SDM's Contact Telephone Number: 代決人聯絡電話號碼：	Mobile Number for receiving system notifications: 手提電話號碼以收取系統通知：
SDM's HK Identity Card No.: 代決人香港身份證號碼：	For non HK Identity Card holder, please fill in information of other identity document 如非香港身份證持有人，請填寫其他身份證明文件資料		
	Document Type: 證明文件類別：	Document No.: 證件號碼：	
Relationship with Vaccine Recipient: 與疫苗接種者關係：			
<input type="checkbox"/> Vaccine recipient aged under 16 疫苗接種者為十六歲以下兒童 Parents/ Family Member/ Residing Person/ Guardian appointed under Guardianship of Minors Ordinance/ Person appointed by court 家長/ 家人/ 同住人士/ 根據《未成年人監護條例》委任的監護人/ 獲法院委任的人*			
<input type="checkbox"/> Vaccine recipient aged 16 or above but incapable of giving consent 疫苗接種者為年滿十六歲但無能力自行給予同意的人士 Family Member/ Residing Person/ Guardian appointed under Mental Health Ordinance/ Director of Social Welfare appointed under Mental Health Ordinance/ Person appointed by court * 家人/ 同住人士/ 根據《精神健康條例》委任的監護人/ 社會福利署署長或根據《精神健康條例》委任的監護人/ 獲法院委任的人*			
Signature of SDM: 代決人簽署：	Date of Signature: 簽署日期：		

Collection of Personal Data - Statement of Purposes

收集個人資料的用途聲明

Statement of Purpose of Collection of Personal Data

1. The personal data provided will be used by the Government for one or more of the following purposes:
 - (i) confirm vaccine recipients' identity. For creation, processing and maintenance of an eHealth (Subsidies) account, payment of subsidy, and the administration and monitoring of the Human Papillomavirus (HPV) Vaccination activities, including but not limited to a verification procedure by electronic means with the data kept by the Immigration Department;
 - (ii) for medical examinations, diagnosis, preparing test results, provision of treatment for continuation of care, and for reference by medical professionals;
 - (iii) for statistical and research purposes; and any other legitimate purposes as may be required, authorised or permitted by law.
2. The vaccination record made for the purpose of this consultation will be accessible by health care personnel in the public and private sectors for the purpose of determining and providing necessary health care service to the recipient.
3. The provision of personal data is voluntary. If you do not provide sufficient information, you/ your child/ ward may not be able to receive vaccination.

Classes of Transferees

4. The personal data you provided are mainly for use within the Government but the information may also be disclosed by the Government to other organisations and third parties for the purposes stated in paragraphs 1 and 2 above, if required.

Access to Personal Data

5. You have the right to request access to and correction of your personal data under sections 18 and 22 and principle 6, schedule 1 of the Personal Data (Privacy) Ordinance (Cap. 486). The Department of Health may impose a fee for complying with a data access request.

Enquiries

6. Enquiries concerning the personal data provided, including the request for access and correction, should be addressed to: Executive Officer, Programme Management and Vaccination Division, Centre for Health Protection, 4/F, 147C Argyle Street, Kowloon (Telephone No.: 2125 2125)

收集個人資料目的

1. 所提供的個人資料，會供政府作下列一項或多項用途：
 - i. 確認疫苗接種者身份。開設、處理及管理醫健通（資助）戶口，接種費付款，及執行和監察 HPV 疫苗接種活動，包括但不限於通過電子程式與入境事務處的數據核對；
 - ii. 作為醫療檢查、診斷研究、化驗結果、跟進治療，並供其他專業醫護人員作參考之用；
 - iii. 作統計和研究用途；及作法例規定、授權或准許的任何其他合法用途。
2. 就是次疫苗接種作出的疫苗接種記錄，可給公營及私營醫護人員，作為決定及為服務使用者提供所需要的醫療服務的用途。
3. 提供個人資料乃屬自願性質。如果你不提供充分的資料，你/ 你的子女/ 受監護者可能無法獲疫苗接種。 接受轉介人的類別
4. 你所提供的個人資料，主要是供政府內部使用，但政府亦可能於有需要時，因以上第 1 及 2 段所列收集資料的目的而向其他機構和第三者人士披露。

查閱個人資料

5. 根據《個人資料(私隱)條例》(香港法例第 486 章) 第 18 和第 22 條以及附表 1 保障資料原則第 6 原則所述，你有權查閱及修正你的個人資料。本署應查閱資料要求而提供資料時，可能要徵收費用。

查詢

6. 如欲查閱或修改有關提供的個人資料，請聯絡：九龍亞皆老街 147C 四樓衛生防護中心項目管理及疫苗計劃科行政主任（電話：2125 2125）。