





**Hong Kong Institute of Medical Laboratory Sciences
Quality Assurance Programme Limited**

REGISTRATION FORM Year 2025

Name of Institution (中文) _____ Tel. No. _____
(English) _____

Address (中文) _____ Fax No. _____
(English) _____

Responsible Person: (Dr./ Mr. / Ms) _____ Email Address: _____

| Programme | | Subscription Fee (HK\$) | Amounts (HK\$) |
|--|--|--|----------------|
| Haematology and Serology (HS) * | Complete Blood Picture (CBP) | \$2,600 | |
| | Coagulation (COAG) | | |
| | Blood Grouping (ABO) | | |
| | Blood Film (Film) | | |
| Anatomical Pathology (AP) | General Staining (GS) | \$2,100 | |
| | Immuno- histochemical Staining (IHC) | \$2,300 | |
| | Two Modules (GS +IHC) | \$3,600 | |
|  Cytopathology (CYTO) | Cytopathology Microscopy Module (CYTOM) | \$2,500 | |
| | Non Gynaecological slide Preparation Module (CYTOPREP) | \$1,500 | |
| | Two Modules (CYTOM + CYTOPREP) | \$3,300 | |
| <i>Programme in collaboration with the HK College of Pathologists</i>  | | Interpretative QAP in Haematology (HI) | \$4,200 |

*For HS program, please indicate (√) what module would you like to join. The subscription fee is same for modular or whole program registration.

Date

Authorized Signature / Chop



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Information and Instructions

1. Details of Programme - refer to information at <http://www.hkimlsqap.org>
2. Frequency of Programme - Exact date of delivery of survey materials refer to the 'Time Schedule for the Year' at <http://www.hkimlsqap.org>

| Frequency | Time Schedule | | | |
|----------------|---------------|----------|---------|----------|
| | February | May | August | November |
| Four per year | AP | AP | AP | AP |
| Four per year | CYTOM | CYTOM | CYTOM | CYTOM |
| Twice per year | | CYTOPREP | | CYTOPREP |
| Four per year | HS & HI | HS & HI | HS & HI | HS & HI |

3. Enrollment of Programme:

To allow sufficient time for processing of new application, registration at least **THREE** months before the commencement date of the "Registration Period" is recommended.

4. Subscription:

- a. Subscription fee is non-refundable.
- b. Change of subscription rate will be notified in advance.
- c. For participant outside Hong Kong, a surcharge on the delivery and administration will be imposed.
- d. Registration will not be confirmed until the subscription fee is received in FULL.

5. Payment:

- a. The subscription fee must be made payable to "Hong Kong Institute of Medical Laboratory Sciences Quality Assurance Programme Ltd." in Hong Kong Dollars by a bank draft, crossed cheque or by autopay system.
- b. Bank draft or crossed cheque should be mailed to Flat 1711, 17/F, Block C, Bell House, 525-543 Nathan Road, Yaumatei, Kowloon.
- c. For payment by autopay system, receipts of transaction should be sent to HKIMLSQAP office or fax to 2124 2798.
- d. For payment via remittance any additional bank charge should be paid by participant.

6. Registration

Each participant will be assigned unique laboratory code for each registered programme which should be used for submission of survey result.

7. Confidentiality

HKIMLSQAP is committed to keep all details of participants confidential. Please refer to <http://www.hkimlsqap.org>