

UNION HOSPITAL
Visiting Medical Staff (VMS)
Change of Personal Data and Contact

In order to facilitate the updating of our database for building an accurate and efficient communicative channel with our Visiting Medical Staff so that the most update and important information of the hospital could be delivered to you promptly, we would like to request your assistance by providing us with your updated personal data and contact.

Please fill out the CHANGED information and return the form to **Doctor Liaison Office, Union Hospital, 18 Fu Kin Street, Tai Wai, Shatin or e-mail to vms@union.org or fax to 2603-0703.** Should you need further information, please do not hesitate to contact Doctor Liaison Office at 2608-3125.

Doctor's Name: _____ (Doctor's Code: _____)

Effective Date: _____

Please "√" the appropriate box (Please fill out the CHANGED INFORMATION):

Mobile No.: (Support SMS function) _____

Pager No.: _____

Office Address: _____
 Use as Correspondence Address

Office Telephone _____

No.: Office Fax No.: _____

Residence Address: _____
 Use as Correspondence Address

Residence Telephone No.: _____

E-mail Address: _____
(for "Discharge Patient Bill Summary" at monthly interval)

Others: _____

Remarks: Please note that if you do not specify the correspondence address, we will use "Office Address" as your correspondence address.

* Signature of Doctor: _____

Date: _____

*** Note: Please use the same signature as your personal record filed in Union Hospital.**