

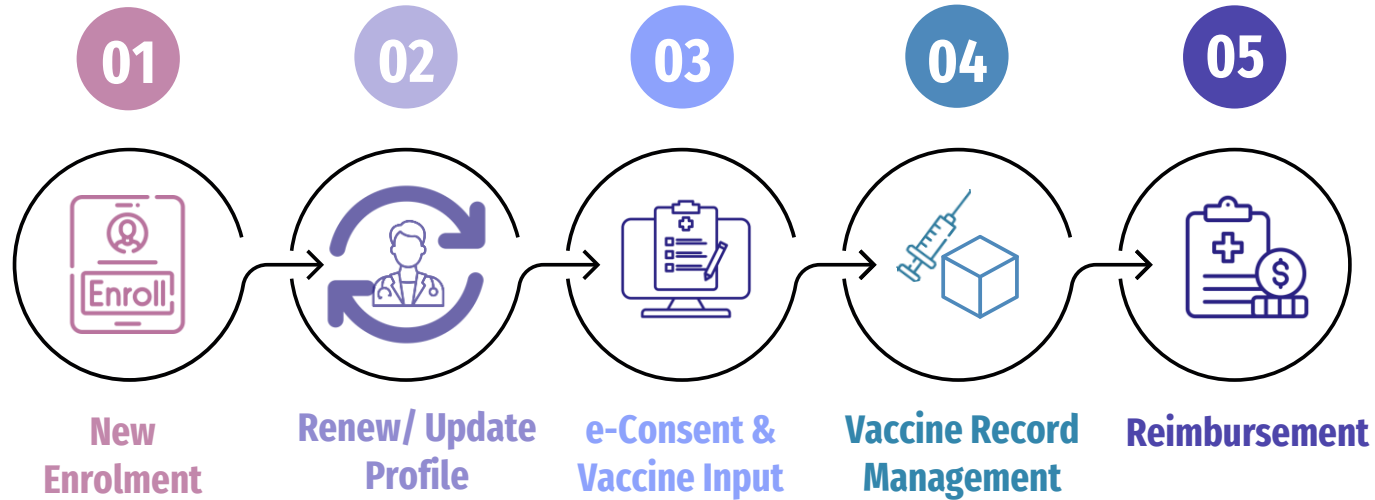


2026/27 Briefing Session

System Workflow



Table of Contents



New Enrolment

Programme Enrolment – New VSS Enrolment

1

Login

醫健通
eHealth
香港特別行政區政府 HKSARGOVT

Electronic Health Record Sharing System
電子健康紀錄互通系統

Healthcare Services Location 醫健通服務地點

VHA OFFICE (HSL ID:3072864797)

User Name

用戶名稱

OR YOU MAY

Login with VHA token

Login with eHealth Pro

Check Info

Check Info

重要提示

1. 所有輸入的資料都必須準確可靠
2. 只可透過此系統獲取及有管理時對獲病人的資料
3. 每次的存取均會被記錄
4. 切勿讓其他人共用你的帳戶/密碼或密碼
5. 請定期更改密碼

個人資料及健康
服務政策聲明
定期系統維護時間表

Important Reminder

1. All patient information is strictly confidential
2. Only access patient data for providing healthcare purpose
3. All access is logged
4. Do not share your account / token
5. Please change your password regularly

Personal Information Collection Statement
Privacy Policy Statement
Regular System Maintenance Schedule

Login to eHealth Portal for enrolment and daily operation

2

醫健通
eHealth

Search menu by keyword

Clinical

eHealth+

PCS

Administration

Emergency Access

Standards

Information

Administration

Healthcare Recipient

User Account

Public-Private Partnership Programme

CRC Programme - Primary Care Doctor Enrolment

VSS Programme - New Application

RVP Programme - New Application

SIVSOP Programme - New Application

Home Page

On the left menu bar, select Administration > Programme

Programme Enrolment – New VSS Enrolment

3 Select corresponding season

Please select

☒ Vaccination Subsidy Scheme

☐ VSS2627 Enrolment

☐ VSS2526 Enrolment

Prerequisite to join VSS/RVP/SIVSOP

- Enrolled in PCD

4

eHR Document Viewer

Page 1 of 41 | 100%

Covering Notes for Private Doctor's Application to Enrol in the Specified Programme entitled "Vaccination Subsidy Scheme" ("Covering Notes")

1. Unless specified otherwise, capitalised terms used herein shall have the meaning as ascribed to them in the "General Terms and Conditions" and "Specific Terms and Conditions" for the Specified Programme entitled "Vaccination Subsidy Scheme" ("VSS").
2. The Government has launched the Specified Programme to provide subsidised Vaccinations of specified type(s) of Vaccines to Scheme Participant through the Private Doctor who

☐ I have read and agreed to the Terms and Conditions of Agreement for Private Doctors, Undertakings & Declaration and Personal Information Collection Statement from the above.

Next

User can confirm the T&C and proceed with enrolment

Programme Enrolment – New VSS Enrolment

5

Vaccination Subsidy Scheme Enrolment

Personal Particulars

HCP & HSL

Bank Information

Doctor Name LO, DOCTOR ONE
 Title Doctor
 Sex ☒ Male ☐ Female ☐ Unknown
 eHR User ID 4770957847
 Professional Registration Number ML99331

Professional Registration Number is the number assigned by the Medical Council of Hong Kong to the Applicant upon registration.

Correspondence Address

Room/Flat		Floor		Block	
Building					
Estate/Village					
Street No.		Street/Road			
Subdistrict	AP LEI CHAU	District	SOUTHERN DISTRICT		
Estate	HK				

Select HSL Address

(Please provide documentary proof of correspondence address such as public utility bill or bank statements, and a copy of Hong Kong Identity Card).

Contact Email Address ABC@ABC.COM
 Daytime Contact Telephone Number -
 Fax Number (Optional)
 Pager Number (Optional)

- Sex (Mandatory)
- Correspondence Address (Mandatory)

Click **Save and Next** to proceed with enrollment

< Back

Save as Draft

Save and Next >

Submit

Input required personal information



Programme Enrolment – New VSS Enrolment

6

Vaccination Subsidy Scheme Enrolment

Personal Particulars — HCP & HSL — Bank Information —

☐ HCP Name (HCP ID)	VIRTUAL UNIT A (4079438887)
☐ HCP Name (HCP ID)	Virtual HOSPITAL - VHC4 (4310898234)
☐ HCP Name (HCP ID)	VIRTUAL UNIT B (9138545537)

☒ HCP Name (HCP ID) Virtual HOSPITAL - VHC4 (4310898234)

HCP Official Name Virtual HOSPITAL - VHC4 [+ Add HSL](#)

Address 6/F, ONE KOWLOON HSL, ONE KOWLOON, 1 WANG YUEN ST, KWUN TONG DISTRICT, KLN

HSL Name [Chi. Name] (HSL ID) Virtual HOSPITAL - VHC4 HSL [虛擬醫院 HSL] (4340633980)

Address (English) 6/F, ONE KOWLOON HSL, ONE KOWLOON, 1 WANG YUEN ST, KWUN TONG DISTRICT, KLN

Address (Chinese) 九龍 觀塘區宏達街1號一號九龍一號九龍 HSL6樓

PCD Practice Name^① PO WAI CHUNG Clinic

PCD Address^② ROOM 14, FLOOR 14, WAI CHUNG BUILDING, 8230 WAI CHUNG ROAD, YAU TSIM MONG DISTRICT, KOWLOON

① The update of "PCD Practice Name" and "PCD Address" here will be displayed in the Primary Care Directory (PCD) automatically.

Clinic Tel No. 20256162

Contact No. to Receive Urgent Notifications Mobile No. 98989898

Status Active

Service Settings ☒ Clinic ☐ Non-Clinic

7



Programme Enrolment – New VSS Enrolment

7

☒ HCP Name (HCP ID) VIRTUAL UNIT A (4079438887)

HCP Official Name VIRTUAL UNIT A [+ Add HSL](#)

Address 16/F, ONE KOWLOON, ONE KOWLOON, 1 WANG YUEN ST, KOWLOON BAY, KWUN TONG DISTRICT, KLN

HSL Name [Chi. Name] (HSL ID) Virtual HOSPITAL - VHC4 HSL (虛擬醫院 HSL) (4340633980)

Address (English) NORTH DISTRICT, NT

Address (Chinese) 新界, 北區

PCD Practice Name^① Virtual Unit A for Chinese Medicine [Select PCD Address](#)

PCD Address^② NORTH DISTRICT, NT

① The update of "PCD Practice Name" and "PCD Address" here will be displayed in the Primary Care Directory (PCD) automatically.

PCD Practice Type Private

Clinic Tel No. 54343654

Contact No. to Receive Urgent Notifications 21234567

Status Active

Confirm PCD Address

PCD Practice Name and Address

To facilitate the address alignment between eHealth and PCD, please indicate which PCD address below matches with this service location in eHealth. If not, please select 'Add this address as a new practice in PCD'.

For any future amendments on PCD Practice Name and Address, please contact HCP user administrator or submit the "HCP / HSL Amendment Form" to eHealth.

☐ Add this address as a new practice in PCD

Please input type of practice

Non-governmental Organization
Private
University

Indicate the **type of practice** for this address.



Programme Enrolment – New VSS Enrolment

8

HSL Name [Chi. Name] (HSL ID)

Address (English)

Address (Chinese)

PCD Practice Name [Select PCD Address](#)

PCD Address

ⓘ The update of "PCD Practice Name" and "PCD Address" here will be displayed in the Primary Care Directory (PCD) automatically.

PCD Practice Type

Clinic Tel No.

Contact No. to Receive Urgent Notifications

Status

Service Settings ☒ Clinic ☐ Non-Clinic

Remarks:

- Detailed arrangement of Pilot Scheme will be announced in early August
- After the announcement, you could indicate your participation to draw vaccine from the Government Contract by going to "eHealth Services" > "User Profile"

Co-Payment Fee

Seasonal Influenza Vaccine

Eligible Group	Type of Vaccines	Co-payment fee	
		Clinic	Non-Clinic
Adult	SIV(IIV)	☒ \$ 200	☐ \$
	SIV(LAIV)	☒ \$ 200	☐ \$
	SIV(RIV)	☐ \$	☐ \$
Children	SIV(IIV)	☐ \$	☐ \$
	SIV(LAIV)	☐ \$	☐ \$

Pneumococcal Vaccine

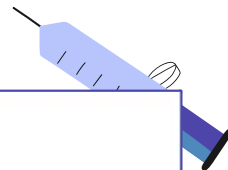
Eligible Group	Type of Vaccines	Co-payment fee	
		Clinic	Non-Clinic
Persons aged 65 years or above	PV(23vPPV)	☐ \$	☐ \$
	PV(PCV15)	☐ \$	☐ \$

Remarks:

- Inactivated Influenza Vaccine (IIV)
- Live-Attenuated Influenza Vaccine (LAIV)
- Recombinant Influenza Vaccine (RIV)
- 23-valent Pneumococcal Polysaccharide Vaccine (23vPPV)

Select Type of Vaccines and Input Co-payment fee

9



Programme Enrolment – New VSS Enrolment

9

Vaccination Subsidy Scheme Enrolment

Enrolment Particulars HCP & HSL Bank Information

HCP Name (HCP ID) VIRTUAL UNIT A (4079438867)

HSL Name [Chi. Name] (HSL ID) Virtual Unit A for Chinese Medicine [醫健通中醫診所-] (2895034931)

Bank Account Number (Note A & C) Bank Code 004 Branch Code 123 Account No. 982161

Bank Name HSBC HONG KONG

Branch Name DES VOEUX ROAD CENTRAL BRANCH

Bank Account Name in English LO DOCTOR ONE

Select

HSL Name [Chi. Name] (HSL ID) Chinese Medicine Information System On-ramp Clinic B2 [醫健通中醫診所乙-] (9461667524)

Bank Account Number (Note A & C) Bank Code Branch Code Account No.

Bank Name

Branch Name

Input Bank Information for each HSL

10

Vaccination Subsidy Scheme Enrolment Submitted Successfully

Enrolment Reference Number VSS001240

Doctor Name LO, MEDICAL PRACTITIONERS TEN

eHR User ID 5938364071

Status Pending Verification

Last Update On 16 June 2026

Your enrolment application (Enrolment Reference Number: VSS001240 has been completed. Please print the appendices below and submit the following supporting documents to the Programme Office via email (vssdoctor@healthbureau.gov.hk) at your earliest convenience (preferably within 30 calendar days from the date of submission)

- 1) Certified true copy of the bank correspondence (e.g. bank statement within 6months) showing the bank name, bank account number and name of the account holder
- 2) Duly signed and completed Authority for Payment to a Bank
- 3) Certified true copy of Business Registration Certificate (applicable for corporate bank account).
- 4) Record of the Vaccine Storage Refrigerator

View Enrolment Details

Print Appendices

Enrolment Successfully

Print Appendices

- ☐ Authority for Payment to a Bank (Eng)
- ☐ Authority for Payment to a Bank (Chi)
- ☐ Record of the Vaccine Storage Refrigerator (Eng)
- ☐ Record of the Vaccine Storage Refrigerator (Chi)

Select All

Confirm

Cancel

For **new applications**, please print the appendices and submit the following supporting documents to the Programme Office via EMAIL (vssdoctor@healthbureau.gov.hk)

Renew / Update Profile

VSS - Renew / Update Profile

1

醫健通
eHealth
香港特別行政區政府 HKSARGOV

Electronic Health Record Sharing System
電子健康紀錄互通系統

Healthcare Service Location: 醫健通服務站
VHA OFFICE (HSL ID:2072364787)

User Name
用戶名稱

Or you may

Login with VHA Smart Login with eHealth ID

重要提示

1. 所有病人的資料都必須嚴格保密
2. 只可透過中醫健通系統及有關專科服務提供病人的資料
3. 切勿向其他人士透露資料
4. 切勿讓其他人使用您的帳戶 / 密碼
5. 請定期更改密碼

重要提示

1. All patient information is strictly confidential
2. Only access patient data for providing healthcare purpose
3. All access is logged
4. Do not share your account / token
5. Please change your password regularly

個人資料收集聲明
Privacy Policy Statement

定期系統維護時間表
Regular System Maintenance Schedule

Login to eHealth Portal for enrolment and daily operation

2

Services

Administrative

To-do List Provider-based Enrolment Report Centre User Profile

Vaccination Record Management

eHealth Services > User Profile

Please select

☐ Chronic Disease Co-Care Scheme

☐ Residential Care Home Vaccination Programme

☐ Seasonal Influenza Vaccination School Outreach Programme

☒ Vaccination Subsidy Scheme

☒ VSS2627 User Profile / Renewal

Select Programme

Year-round updates allowed for the VSS 2026/27 season

- Doctors can update their profiles **anytime** throughout the 2026/27 season, e.g., co-payment fees, adding/removing HSL, bank information
- Must submit renewal application before new season start

VSS - Renew / Update Profile

3

Clinical
eHealth+
Administration
Emergency Access
Standards
Information

eHR Document Viewer

Covering Notes for Private Doctor's Application to Enrol in the Specified Programme entitled "Vaccination Subsidy Scheme" ("Covering Notes")

- Unless specified otherwise, capitalised terms used herein shall have the meaning as ascribed to them in the "General Terms and Conditions" and "Specific Terms and Conditions" for the Specified Programme entitled "Vaccination Subsidy Scheme" ("VSS").
- The Government has launched the Specified Programme to provide subsidised Vaccinations of specified type(s) of Vaccines to Scheme Participant through the Private Doctor who

☐ I have read, understood and agreed to the Terms and Conditions of Agreement for Private Doctors, Undertakings & Declaration and Personal Information Collection Statement from the above.

Next

Prerequisite to join VSS/RVP/SIVSOP

- Enrolled in PCD

User can confirm the T&C and proceed with enrolment

VSS - Renew / Update Profile

4

er Profile

HCP & HSL

☐ HCP Name (HCP ID)

DHC KWAI TSING TEST (3881542584)

☒ HCP Name (HCP ID)

Virtual HOSPITAL - VHC4 (4310898234)

☒ HCP Name (HCP ID)

DHC EXPRESS-NORTH (6678116401)

Prefilled information according to the current doctor profile

☒ HCP Name (HCP ID)

Virtual HOSPITAL - VHC4 (4310898234)

HCP Official Name

Virtual HOSPITAL - VHC4

+ [Add HSL](#)

Address

6/F, ONE KOWLOON HSL, ONE KOWLOON, 1 WANG YUEN ST, KWUN TONG DISTRICT, KLN

HSL Name [Chi. Name] (HSL ID)

Virtual HOSPITAL - VHC4 HSL (虛擬醫院 HSL) (4340633980)

Address (English)

6/F, ONE KOWLOON HSL, ONE KOWLOON, 1 WANG YUEN ST, KWUN TONG DISTRICT, KLN

Address (Chinese)

九龍, 觀塘區宏達街1號一號九龍一號九龍 HSL6樓

PCD Practice Name

PO WAI CHUNG Clinic

PCD Address

ROOM 14, FLOOR 14, WAI CHUNG BUILDING, 8230 WAI CHUNG ROAD, YAU TSIM MONG DISTRICT, KOWLOON

The update of "PCD Practice Name" and "PCD Address" here will be displayed in the Primary Care Directory (PCD) automatically.

Clinic Tel No.

20256162

Contact No. to Receive Urgent Notifications

Mobile No.

98989898

Status

Active

Service Settings

☒ Clinic ☐ Non-Clinic

VSS - Renew / Update Profile

5

HSL Name [Chi. Name] (HSL ID) Virtual HOSPITAL - VHC4 HSL [虛擬醫院 HSL] (4340633980)

Address (English) 6/F, ONE KOWLOON HSL, ONE KOWLOON, 1 WANG YUEN ST, KWUN TONG DISTRICT, KLN

Address (Chinese) 九龍 觀塘區安達街1號九龍一號九龍 HSL6樓

PCD Practice Name^① Virtual HOSPITAL - VHC4 HSL

PCD Address^② 6/F, ONE KOWLOON HSL, ONE KOWLOON, 1 WANG YUEN ST, KWUN TONG DISTRICT, KLN

^① The update of "PCD Practice Name" and "PCD Address" here will be displayed in the Primary Care Directory (PCD) automatically.

PCD Practice Type Private

Clinic Tel No. 20256162

Contact No. to Receive Urgent Notifications Clinic Tel No. [20256162]

Status Active

Service Settings ☒ Clinic ☒ Non-Clinic

Remarks:

- Detailed arrangement of Pilot Scheme will be announced in early August
- After the announcement, you could indicate your participation to draw vaccine from the Government Contract by going to "eHealth Services" > "User Profile"

Co-Payment Fee

Seasonal Influenza Vaccine

Eligible Group	Type of Vaccines	Co-payment fee		26/27 Vaccine Stock Availability ^③
		Clinic	Non-Clinic	
Adult	SIV(IIV)	☒ \$ 20	☒ \$ 30	☒
	SIV(LAIV)	☒ \$ 20	☒ \$ 30	☒
	SIV(RIV)	☒ \$ 20	☒ \$ 30	☒
Children	SIV(IIV)	☒ \$ 30	☒ \$ 30	☒
	SIV(LAIV)	☒ \$ 30	☒ \$ 30	☒

Pneumococcal Vaccine

Eligible Group	Type of Vaccines	Co-payment fee		26/27 Vaccine Stock Availability ^③
		Clinic	Non-Clinic	
Persons aged 65 years or above	PV(23vPPV)	☒ \$ 15	☒ \$ 36	☒
	PV(PCV15)	☒ \$ 15	☒ \$ 36	☒

Remarks:

- Inactivated Influenza Vaccine (IIV)
- Live-Attenuated Influenza Vaccine (LAIV)
- Recombinant Influenza Vaccine (RIV)
- 23-valent Pneumococcal Polysaccharide Vaccine (23vPPV)
- 15-valent Pneumococcal Conjugate Vaccine (PCV15)

^③ The type of vaccine, co-payment fee and vaccine stock change will be effective and reflected on the public website on the next day.

Bank Account Number (Note A & C)* Bank Code 020 Branch Code 022 Account No. 2333352

Bank Name HAPPY BANK

Branch Name HAPPY BRANCH

Bank Account Name in English DOCTOR AS

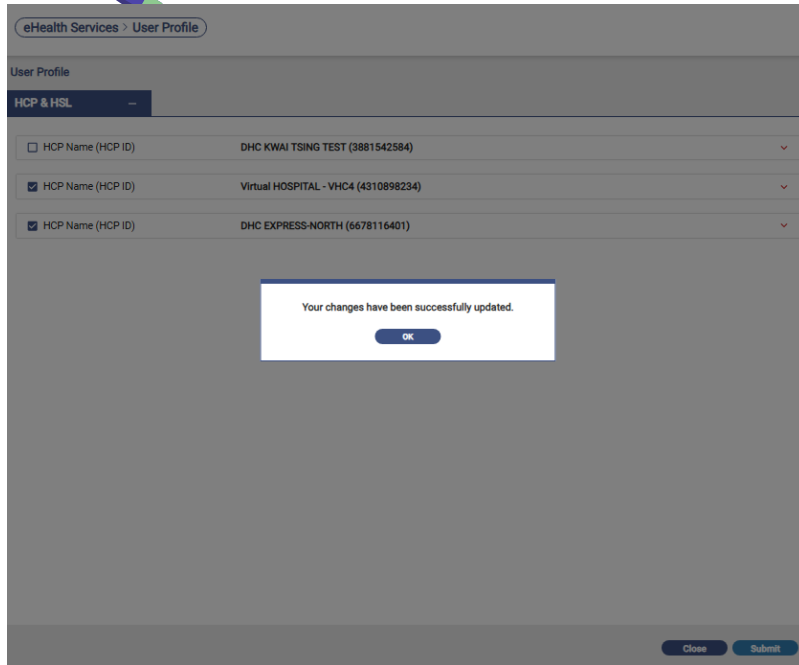
Unticking "26/27 Vaccine Stock Availability" indicates the vaccine is **out of stock**.

The type of vaccine, co-payment fee and vaccine stock change will be effective and reflected on the public website **on the next day**.



VSS - Renew / Update Profile

Successful



eHealth Services > User Profile

User Profile

HCP & HSL

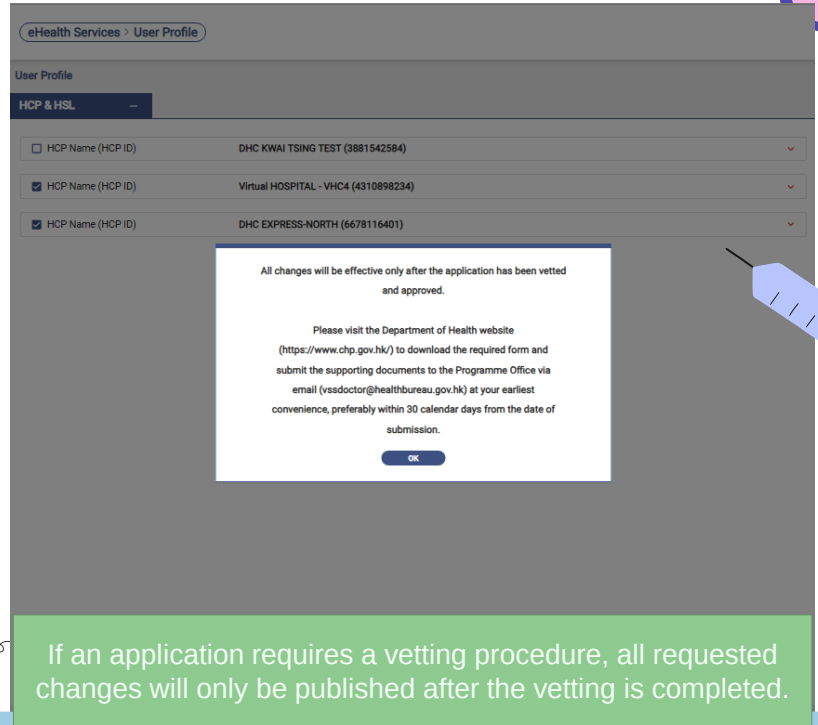
☐ HCP Name (HCP ID)	DHC KWAI TSING TEST (3881542584)
☒ HCP Name (HCP ID)	Virtual HOSPITAL - VHC4 (4310898234)
☒ HCP Name (HCP ID)	DHC EXPRESS-NORTH (6678116401)

Your changes have been successfully updated.

OK

Close Submit

If an application does not require vetting, the renewal application/ update is deemed successful.



eHealth Services > User Profile

User Profile

HCP & HSL

☐ HCP Name (HCP ID)	DHC KWAI TSING TEST (3881542584)
☒ HCP Name (HCP ID)	Virtual HOSPITAL - VHC4 (4310898234)
☒ HCP Name (HCP ID)	DHC EXPRESS-NORTH (6678116401)

All changes will be effective only after the application has been vetted and approved.

Please visit the Department of Health website (<https://www.chp.gov.hk/>) to download the required form and submit the supporting documents to the Programme Office via email (vsdoctor@healthbureau.gov.hk) at your earliest convenience, preferably within 30 calendar days from the date of submission.

OK

If an application requires a vetting procedure, all requested changes will only be published after the vetting is completed.

Remember to submit the required supporting documents to the Programme Office via EMAIL (vsdoctor@healthbureau.gov.hk)



e-Consent & Vaccine Input



Digital Channels: For participants and guardians who submit consent via eHealth App or Smart ID Card (details on next page).

Paper Forms: Still available and accepted for those who do not use/have access to these digital options.

Streamlined e-Consent Workflow



Pre-arrival Consent (Via eHealth App)

Vaccine Recipients can submit their e-Consent at any time, either prior to or upon arrival at the clinic.



On-site Consent (Via Smart ID Card)

Vaccine Recipients can insert their Smart ID card at the clinic for one-click e-Consent submission.



e-Consent on Vaccine Input Workflow

≥18 who has joined eHealth

1

Search Participant Via Smart IC

Please select participant

Enter Document No.

Document Type: Hong Kong Identity Card

HKIC No.:

OR

Read Smart ID Card



2

Check Previous Vaccine Records

eHealth Services > Administration > Information

Name: 陳大文 CHAN, TAI MAN HKIC No.: 0998796(8) DOB: 01-Jan-1950 Age: 76 years Sex: M

eHealth Services > Vaccination Subsidy Scheme > Vaccination Record

Vaccination Record

No. of records:	eHealth	Hospital Authority	Department of Health
	1	0	0

Injection Date	Vaccine	Dose	Information Provider	Remarks
1 25 Mar 2026	Seasonal Influenza 2025/2026	Only Dose	DR. LEE SIU SUN	

Page 1 of 1 (1 items)

Disclaimer Vaccination Record Provider
The immunization record shown on this page (only include pneumococcal vaccination, seasonal influenza vaccination, measles, human swine influenza vaccination, COVID-19 vaccination and human papillomavirus vaccination) is to the best knowledge of the information provider and may not be exhaustive. Service Provider is advised to verify the vaccination history with the patient before administering the vaccine.

3

Input Vaccine record

eHealth Services > Vaccination Subsidy Scheme > Vaccination Details

Vaccination Information

HSL Name: Virtual HOSPITAL - VHC4 HSL (4340633980)

Scheme: Vaccination Subsidy Scheme (Provide vaccination services at clinic and non-clinic setting)

Service Date: 05-09-2026

Category: ☒ Elders ☐ Persons with Intellectual Disability ☐ Persons receiving Disability Allowance / standard rate of "100% disabled" or "requiring constant attendance" under CSSA

Recipient's Conditions: ☒ With High-Risk ☐ Without High-Risk

Service Setting: ☒ Clinic ☐ Non-Clinic

Subsidy	Dose	Subsidy Amount	Remarks
☒ IV-IPD 2025/26	Only Dose	\$ 280	
☐ RV-IPD 2025/26	Only Dose	\$ 280	
☐ Z/zPPV	Only Dose	\$ 400	
☐ PCV15	Only Dose	\$ 800	
Total Subsidy Amount		\$ 280	

Co-payment Fee: \$ 100

☐ The healthcare recipient is a mentally incapacitated person (MIP)

Contact Information: *852 61234567 Language preference: ☒ 中文 ☐ English

(Please ask the scheme participant to provide his/her contact number, or one belonging to his/her relative or carer, that can receive notification)

e-Consent on Vaccine Input Workflow

>=18 year old who has not yet joined eHealth

1

Search Participant Via Smart IC

Please select participant

Enter Document No.

Document Type: Hong Kong Identity Card

HKIC No.:

OR

Read Smart ID Card



2

Input ACRU

Participant Information & Eligibility Checking eHRSS Registration

Participant Information

Document Type: Hong Kong Identity Card

HKIC No.: K105816(9)

HKIC Symbol: ☐ A ☐ C ☒ O ☐ U [What is HKIC Symbol?](#)

English Name: TEST, ONE

Date of Birth: 01-Jan-2000

Sex: Male

3

- >=18 year old **mandate** to join eHealth
- Sharing Consent is opt-in

eHRSS Registration

☐ Participant has not registered to eHRSS. Please click the checkbox to complete the eHRSS registration and give sharing consent to your organisation.

☐ The healthcare recipient / The substitute decision maker(SDM) consents the healthcare recipient to register with eHealth

☐ The healthcare recipient / The substitute decision maker(SDM) consents to give sharing consent to the healthcare provider.

☒ Consent to be given by patient ☐ Consent to be given by Substitute Decision Maker (SDM)

Registration Date: 23-Oct-2025

Communication Language: ☒ Chinese ☐ English

Mobile Contact No.:

(Please provide Hong Kong mobile number with prefix 4/5/6/7/8/9)

☐ I confirm the healthcare recipient has expressly declared and confirmed that:

- he/she has read and understood the Participant Information Notice and the Personal Information Collection Statement of eHealth.
- he/she consents to register with eHealth, which enables authorised healthcare providers to access and share his/her eHealth records for healthcare purposes.

4

Participants' eHealth registration and sharing consent is given successfully

Participant Information & Eligibility Checking eHealth Registration

Participant's eHealth registration and sharing consent is given successfully

eHR No.: 6394-6633-3104

Registration Date: 18-Nov-2025

Communication Language: Chinese

Mobile Contact No.: 852-99989998

Communication Means: SMS

eHealth Sharing Consent:

HCP ID	Service Provider
4310898234	Virtual HOSPITAL - VHCA

☐ I confirm the healthcare recipient has expressly declared and confirmed that:

- he/she has read and understood the Participant Information Notice and the Personal Information Collection Statement of eHealth
- he/she consents to register with eHealth, which enables authorised healthcare providers to access and share his/her eHealth records
- he/she consents to give sharing consent to the above healthcare provider.

5

Review Previous Vaccine Records

陳大文 CHAN TAI MAN 0086796(8) 01-Jan-1950 75 years M

eHealth Services > Vaccination Subsidy Scheme > Vaccination Record

Vaccination Record

No. of records:	eHealth	Hospital Authority	Department of Health
1	1	0	0

Injection Date	Vaccine	Dose	Information Provider	Remarks
1 25 Mar 2020	Seasonal Influenza 2020-2020	Only Dose	DR LEE SIU SUN	

Page 1 of 1 (1 items)

Disclaimer Vaccination Record Provider

The immunisation record shown on this page (only include pneumococcal vaccination, seasonal influenza vaccination, measles, human swine influenza vaccination, COVID-19 vaccination and human papillomavirus vaccination) is to the best knowledge of the information provider and may not be exhaustive. Service Provider is advised to verify the vaccination history with the patient before administering the vaccine.

6

Input Vaccine records

陳大文 CHAN TAI MAN 0086796(8) 01-Jan-1950 75 years M

eHealth Services > Vaccination Subsidy Scheme > Vaccination Details

Vaccination Information

HCP Name: Virtual HOSPITAL - VHCA HPL 4348812885

Vaccination Subsidy Scheme:

Service Date: 01-Jan-2020

Category: ☒ Elderly ☐ Persons with Intellectual Disability ☐ Persons requiring Disability Allowance / standard rate of "100% disabled" or "requiring constant attendance" under CSSA

Recipient's Conditions: ☒ With High-Risk ☐ Without High-Risk

Service Setting: ☒ Clinic ☐ Non-Clinic

Subsidy ID	Dose	Subsidy Amount	Remarks
4310898234	Only Dose	\$ 200	
4310898234	Only Dose	\$ 300	
4310898234	Only Dose	\$ 400	
4310898234	Only Dose	\$ 500	
4310898234	Only Dose	\$ 600	
Total Subsidy Amount: \$ 200			

Co-payment (a.p.)

☐ The healthcare recipient is a mentally incapacitated person (MIP)

Contact Information: ☒ eHRSS ☐ Language preference: ☒ Chinese ☐ English

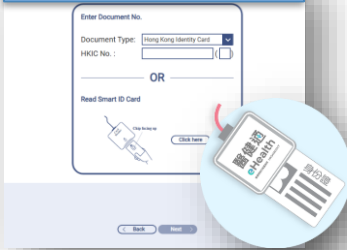
(Please ask the scheme participant to provide his/her contact number, or one belonging to his/her relative or carer, that can receive notification)

e-Consent on Vaccine Input Workflow

<16 year old who has not yet joined eHealth (Both VR & Guardian use Smart IC)

1

Search Participant Via Smart IC



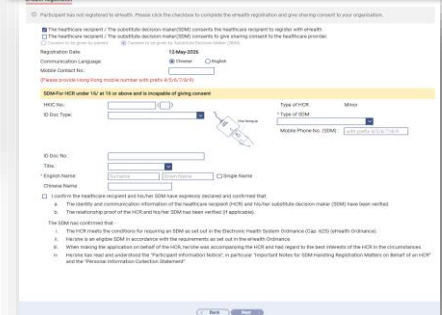
2

Input ACUR



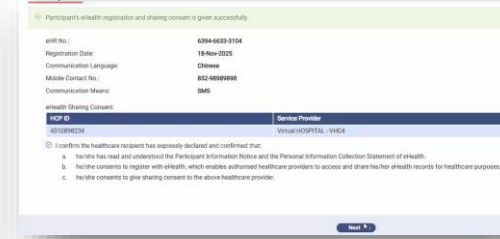
3

<18 year old is opt-out to join eHealth
Sharing Consent is opt-in



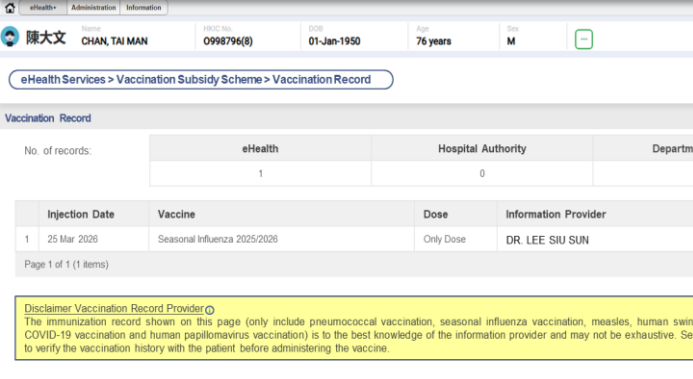
4

Participants' eHealth registration and sharing consent is given successfully



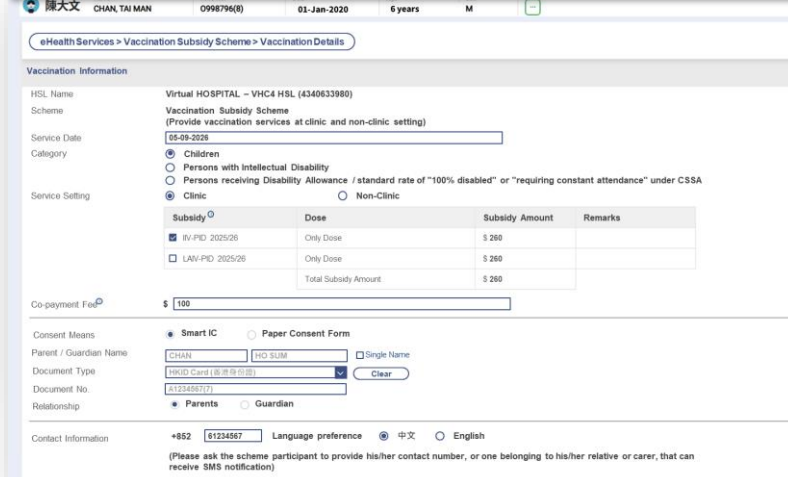
5

Review Previous Vaccine Records



6

Retrieve the HKIC card info directly when selecting Smart IC



e-Consent on Vaccine Input Workflow

<16 year old who has joined eHealth (Guardian consent via eHealth App)

1 Search Participant Via Manual Input

Enter Document No.

Document Type:

HKIC No.:

OR

Read Smart ID Card

[Click here](#)

[Back](#) [Next](#)

2 Review Previous Vaccine Records

陳大文 CHAN, TAI MAN 0998796(8) 01-Jan-1950 76 years M

eHealth Services > Vaccination Subsidy Scheme > Vaccination Record

Vaccination Record

No. of records:	eHealth	Hospital Authority	Department of Health
	1	0	0

Injection Date	Vaccine	Dose	Information Provider	Remarks
1 25 Mar 2026	Seasonal Influenza 2025/2026	Only Dose	DR. LEE SIU SUN	

Page 1 of 1 (1 items)

Disclaimer Vaccination Record Provider
The immunization record shown on this page (only include pneumococcal vaccination, seasonal influenza vaccination, measles, human swine influenza vaccination, COVID-19 vaccination and human papillomavirus vaccination) is to the best knowledge of the information provider and may not be exhaustive. Service Provider is advised to verify the vaccination history with the patient before administering the vaccine.

3 Input Vaccine and required fields

陳大文 CHAN, TAI MAN 0998796(8) 01-Jan-2020 6 years M

eHealth Services > Vaccination Subsidy Scheme > Vaccination Details

Vaccination Information

HSL Name: Virtual HOSPITAL - VMC4 HSL (4340633980)

Scheme: Vaccination Subsidy Scheme (Provide vaccination services at clinic and non-clinic setting)

Service Date: 05-09-2026

Category: ☐ Elders ☒ Persons with Intellectual Disability ☐ Persons receiving Disability Allowance / standard rate of "100% disabled" or "requiring constant attendance" under CSSA

Type of Documentary Proof: ☒ Registration Card for People with Disabilities

Service Setting: ☒ Clinic ☐ Non-Clinic

Subsidy	Dose	Subsidy Amount	Remarks
☒ IV-PID 2025/26	Only Dose	\$ 260	
☐ IAN-PID 2025/26	Only Dose	\$ 260	
Total Subsidy Amount		\$ 260	

Co-payment Fee: \$ 100

Consent Means: ☒ eHealth App ☐ Smart IC ☐ Paper Consent Form

Consent Date: 05-09-2026

Parent / Guardian Name: Chan Wai Sun

Document Type: ☒ HKID Card (香港身份證)

Document No.: A1234567(7)

Relationship: ☒ Parents ☐ Guardian

Contact Information: +852 61234567 Language preference: ☒ 中文 ☐ English
(Please ask the scheme participant to provide his/her contact number, or one belonging to his/her relative or carer, that can receive SMS notification)

[Back](#)

Vaccination Input - By Doctor

Input Vaccination Details

eHealth+ Administration Information
VSS PO AA Logout

陳大文

CHAN, TAI MAN

HKID No. **0998796(8)**

DOB **01-Jan-2020**

Age **6 years**

Sex **M**

...

eHealth Services > Vaccination Subsidy Scheme > Vaccination Details

Vaccination Information
Vaccination Record >

HSL Name

Scheme

Service Date

Category

Service Setting

Virtual HOSPITAL – VHC4 HSL (4340633980)

Vaccination Subsidy Scheme

☒ Children
☐ Persons with Intellectual Disability
☐ Persons receiving Disability Allowance / standard rate of “100% disabled” or “requiring constant attendance” under CSSA

☒ Clinic ☐ Non-Clinic

Subsidy	Dose	Subsidy Amount	Remarks
☒ IIV-PID 2025/26	Only Dose	\$ 260	
☐ LAIV-PID 2025/26	Only Dose	\$ 260	
Total Subsidy Amount		\$ 260	

Co-payment Fee

Consent Means ☒ eHealth App ☐ Smart IC ☐ Paper Consent Form

Consent Date

Parent / Guardian Name

Document Type

Document No.

Relationship ☒ Parents ☐ Guardian

Contact Information Language preference ☒ 中文 ☐ English

(Please ask the scheme participant to provide his/her contact number, or one belonging to his/her relative or carer, that can receive information.)

- Select the vaccine type(s)
- After selection, co-payment fee **filled automatically** from inputted in enrolment

- If selecting “**Paper Consent Form**” as the Consent Means, please remember to complete the paper form.

- Display eHealth communication means if the VR has joined eHealth

< Back
Continue >

Vaccination Input - By Doctor

Vaccination Complete

陳大文

Name
CHAN, TAI MAN

HKIC No.
0998796(8)

DOB
01-Jan-1950

Age
76 years

Sex
M

eHealth Services > Vaccination Subsidy Scheme > Confirm Input

Submitted!

Vaccination Information

Transaction No

TG1234500001234

HSL

Virtual HOSPITAL – VHC4 HSL (4340633980)

Scheme

Vaccination Subsidy Scheme
(Provide vaccination services at clinic and non-clinic setting)

Service Date

25 Mar 2026

Service Type

Registered Medical Practitioners

Category

Persons with Intellectual Disability

Type of Documentary Proof

Registration Card for People with Disabilities

Service Setting

Clinic

Subsidy	Dose	Subsidy Amount
IIV-PID 2025/26	Only Dose	\$ 260
Total Subsidy Amount		\$ 0

Co-payment Fee

\$ 100

Consent Means

eHealth App

Contact Information

61234567

The recipient will receive a SMS notification after vaccination.

Next Input >

Vaccination Input - By Clinic Admin

1

Search Participant Via Manual Input or Smart IC

Enter Document No.

Document Type: Hong Kong Identity Card

HKIC No. :

OR

Read Smart ID Card

 [Click here](#)

[Back](#) [Next](#)

2

Check Previous Vaccine Records

[eHealth Services > Vaccination Subsidy Scheme > Vaccination Record](#)

Vaccination Record

No. of records:	eHealth	Hospital Authority	Department of Health
	1	0	0

Injection Date	Vaccine	Dose	Information Provider	Remarks
1 25 Mar 2026	Seasonal Influenza 2025/2026	Only Dose	DR. LEE SIU SUN	

Page 1 of 1 (1 items)

Disclaimer Vaccination Record Provider
The immunization record shown on this page (only include pneumococcal vaccination, seasonal influenza vaccination, measles, human swine influenza vaccination, COVID-19 vaccination and human papillomavirus vaccination) is to the best knowledge of the information provider and may not be exhaustive. Service Provider is advised to verify the vaccination history with the patient before administering the vaccine.

3

Select Service provider is required before vaccination

[eHealth Services > Vaccination Subsidy Scheme > Select HCPProf](#)

Select HCPProf

Doctor Name : DR. LEE SIU SUN

HSL Name: Virtual HOSPITAL – VHC4 HSL (4340633980)

[Next](#)

4

Input vaccination details

[eHealth Services > Vaccination Subsidy Scheme > Vaccination Details](#)

Vaccination Information

Doctor Name: DR. LEE SIU SUN
HSL Name: Virtual HOSPITAL – VHC4 HSL (4340633980)
Scheme: Vaccination Subsidy Scheme
Service Date: 05-09-2026
Category: Persons with Intellectual Disability
Type of Documentary Proof: Registration Card for People with Disabilities
Service Setting: Clinic

Subsidy ID	Dose	Subsidy Amount	Remarks
☒ SI/PID 2025/26	Only Dose	\$ 200	
☐ SI/PID 2025/26	Only Dose	\$ 200	
☐ 23MPV	Only Dose	\$ 400	
☐ PCV15	Only Dose	\$ 800	
Total Subsidy Amount		\$ 260	

Co-payment Fee: \$ 100

☐ The healthcare recipient is a mentally incapacitated person (MIP)

Contact Information: +852 01344867 Language preference: 中文 English
(Please ask the scheme participant to provide his/her contact number, or one belonging to his/her relative or carer, that can receive notification)

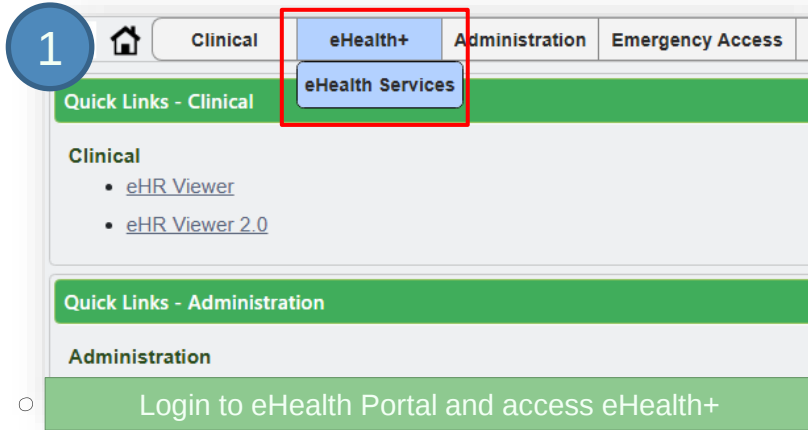
[Back](#)

Mock Up

Vaccine Record Management

Vaccine Record Management

1



Home Clinical **eHealth+** Administration Emergency Access

eHealth Services

Quick Links - Clinical

Clinical

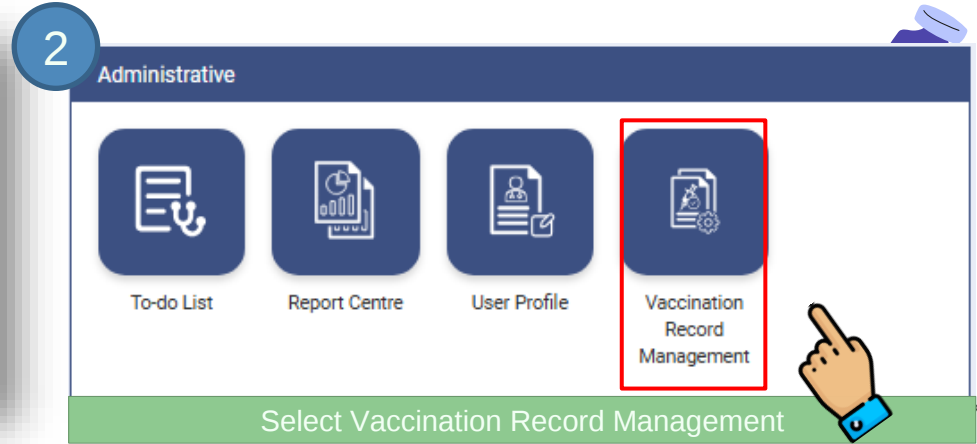
- eHR Viewer
- eHR Viewer 2.0

Quick Links - Administration

Administration

Login to eHealth Portal and access eHealth+

2

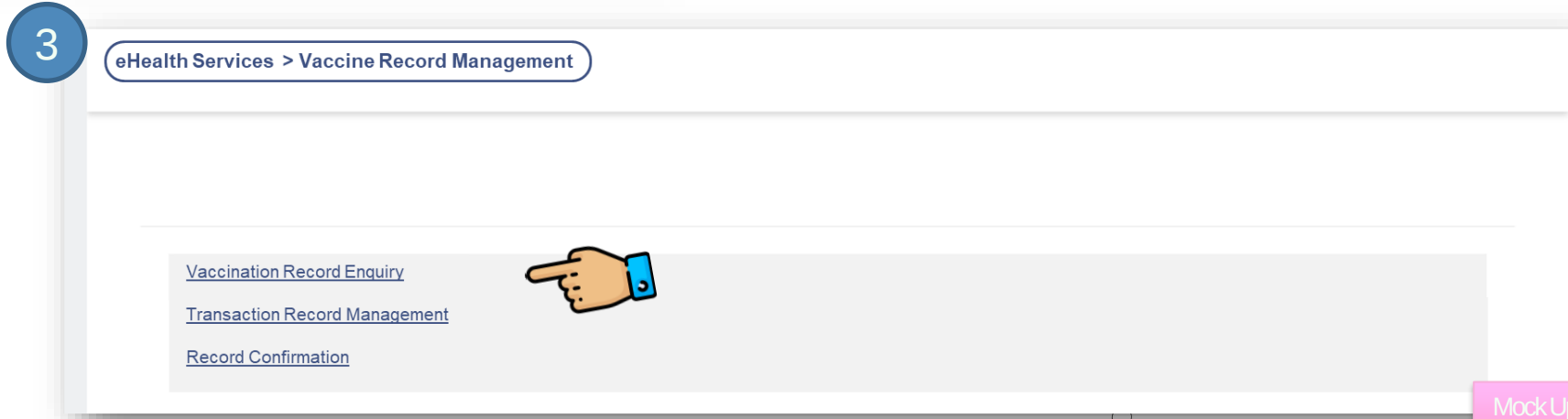


Administrative

To-do List Report Centre User Profile **Vaccination Record Management**

Select Vaccination Record Management

3



eHealth Services > Vaccine Record Management

[Vaccination Record Enquiry](#)

[Transaction Record Management](#)

[Record Confirmation](#)

(1) Vaccination Record Enquiry

1 Search Participant Via Manual Input or Smart IC

Enter Document No.

Document Type: Hong Kong Identity Card

HKIC No.:

OR

Read Smart ID Card

 [Click here](#)

[Back](#) [Next](#)

for a non-eHealth participant

2 When searching vaccine records for a non-eHealth participant, the system shall require the user to input the participant's English Name, Date of Birth, and Sex.

eHealth Services > Vaccine Record Management > Vaccine Record Enquiry

Vaccine Record Enquiry

Document Type: Hong Kong Identity Card

HKIC No.: I696555(A)

English Name*: Surname Given Name ☐ Single Name

Chinese Name: 中文名稱

Date of Birth*: DD - MMM - YYYY

Sex*: ☐  Male ☐  Female

3 View Vaccine Record

 陳大文 CHAN, TAI MAN HKIC No. 0998796(8) DOB 01-Jan-1950 Age 76 years Sex M ...

eHealth Services > Vaccination Subsidy Scheme > Vaccination Record

Vaccination Record

No. of records:	eHealth	Hospital Authority	Department of Health
	1	0	0

Injection Date	Vaccine	Dose	Information Provider	Remarks
1 25 Mar 2026	Seasonal Influenza 2025/2026	Only Dose	DR. LEE SIU SUN	

Page 1 of 1 (1 items)

Disclaimer Vaccination Record Provider

The immunization record shown on this page (only include pneumococcal vaccination, seasonal influenza vaccination, measles, human swine influenza vaccination, COVID-19 vaccination and human papillomavirus vaccination) is to the best knowledge of the information provider and may not be exhaustive. Service Provider is advised to verify the vaccination history with the patient before administering the vaccine.



(2) Transaction Record Management

1

Select search criteria

eHealth Services > Vaccine Record Management > Transaction Record Management

Transaction Record Management

Scheme: **Vaccination Subsidy Scheme**

HSL Name: **Virtual HOSPITAL – VHC4 HSL (4340633980)**

Status: **Any**

Transaction Date: **27-04-2026** TO **28-04-2026**

Transaction No:

RCH / School Code:

2

View the result record

eHealth Services > Transaction Record Management

Transaction Record Management

Scheme: **Vaccination Subsidy Scheme**

HSL Name: **Virtual HOSPITAL – VHC4 HSL (4340633980)**

Status: **Any**

Transaction No: **Any**

Transaction Date: **27-04-2026 TO 28-04-2026**

RCH / School Code: **N/A**

	Transaction No	Transaction Date & Time	Doc Type Identity Doc No	Name	Amount Claimed (\$)	Status	HSL Name	Clinic Admin
1	VSS TG12345-123-4	17 Apr 2026 15:22	HQIC A123456(7)	CHAN, TAI MAN	260	Ready to Reimburse	Virtual HOSPITAL – VHC4 HSL (4340633980)	Mary Lam (123456789)
2	VSS TG12345-123-5	17 Apr 2026 15:30	HQIC A123456(8)	CHAN, SIU MAN	260	Voided	Virtual HOSPITAL – VHC4 HSL (4340633980)	Mary Lam (123456789)
3	VSS TG12345-123-6	17 Apr 2026 16:22	HQIC A123456(9)	CHOW, YAT SUM	260	Ready to Reimburse	Virtual HOSPITAL – VHC4 HSL (4340633980)	Mary Lam (123456789)
4	VSS TG12345-123-7	17 Apr 2026 16:30	HQIC A123456(1)	CHOW, KA LEUNG	260	Pending Confirmation	Virtual HOSPITAL – VHC4 HSL (4340633980)	Mary Lam (123456789)

Page 1 of 1 (4 items)

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(2) Transaction Record Management

Void Vaccination Record



1

Doctor can void the vaccination record within 24 hours

陳大文 CHAN, TAI MAN 0998796(8) 01-Jan-1950 76 years M

eHealth Services > Transaction Record Management > Vaccination Details

Vaccination Information

Transaction No **TG12345000001234**
 HSL Virtual HOSPITAL – VHC4 HSL (4340633980)
 Scheme Vaccination Subsidy Scheme
 (Provide vaccination services at clinic and non-clinic setting)
 Service Date 25 Mar 2026
 Service Type Registered Medical Practitioners
 Category Persons with Intellectual Disability
 Type of Documentary Proof Registration Card for People with Disabilities
 Service Setting Clinic

Subsidy ^①	Dose	Subsidy Amount
IIV-PID 2025/26	Only Dose	\$ 260
Total Subsidy Amount		\$ 0

Co-payment Fee^② \$ 100
 Consent Means Smart IC
 Contact Information 61234567
 Void Reason

< Back

Confirm Void >

2

Void Record Completed

陳大文 CHAN, TAI MAN 0998796(8) 01-Jan-1950 76 years M

eHealth Services > Transaction Record Management > Vaccination Details

Vaccination Information

Void Transaction completed!

Transaction No **TG12345000001234**
 HSL Virtual HOSPITAL – VHC4 HSL (4340633980)
 Scheme Vaccination Subsidy Scheme
 (Provide vaccination services at clinic and non-clinic setting)
 Service Date 25 Mar 2026
 Service Type Registered Medical Practitioners
 Category Persons with Intellectual Disability
 Type of Documentary Proof Registration Card for People with Disabilities
 Service Setting Clinic

Subsidy ^①	Dose	Subsidy Amount
IIV-PID 2025/26	Only Dose	\$ 260
Total Subsidy Amount		\$ 0

Co-payment Fee^② \$ 100
 Consent Means Smart IC
 Contact Information 61234567
 Void Reason Double dose
 Void Transaction No. V26623-52-7 (23 Jun 2026 12:20)

< Back

Mock Up



(3) Record Confirmation

Confirm Vaccine Records Created by Clinic Admin

1 Select search criteria

eHealth Services > Vaccine Record Management > Record Confirmation

Record Confirmation

Scheme:

HSL Name:

Transaction Date: TO

Clinic Admin:

eHealth Services > Vaccine Record Management > Record Confirmation

Transaction Record Management

Scheme: **Vaccination Subsidy Scheme** Transaction Date: 27-04-2026 TO 28-04-2026
HSL Name: **Virtual HOSPITAL – VHC4 HSL (4340633980)** Clinic Admin: **Any**

	☒	Transaction No	Transaction Date & Time	Doc Type Identity Doc No	Name	Amount Claimed (\$)	Status	HSL Name	Clinic Admin
1	☒	VSS TG12345-123-4	17 Apr 2026 15:22	HKIC A123456(7)	CHAN, TAI MAN	280	Pending Confirmation	Virtual HOSPITAL – VHC4 HSL (4340633980)	Mary Lam (123456789)
2	☐	VSS TG12345-123-5	17 Apr 2026 15:30	HKIC A123456(8)	CHAN, SIU MAN	280	Suspended	Virtual HOSPITAL – VHC4 HSL (4340633980)	Mary Lam (123456789)
3	☒	VSS TG12345-123-6	17 Apr 2026 16:22	HKIC A123456(9)	CHOW, YAT SUM	280	Pending Confirmation	Virtual HOSPITAL – VHC4 HSL (4340633980)	Mary Lam (123456789)
4	☒	VSS TG12345-123-7	17 Apr 2026 16:30	HKIC A123456(1)	CHOW, KA LEUNG	280	Pending Confirmation	Virtual HOSPITAL – VHC4 HSL (4340633980)	Mary Lam (123456789)

Page 1 of 1 (4 items)

2

To confirm the vaccination record created by Clinic Admin

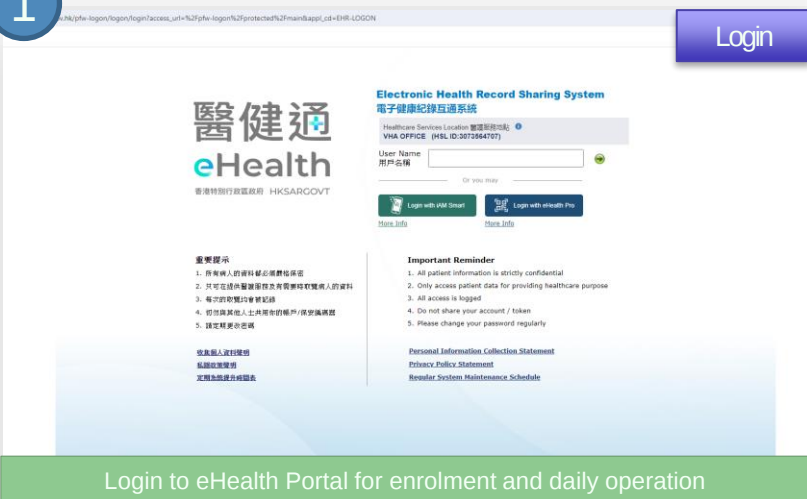
Confirm Selected >

Mock Up

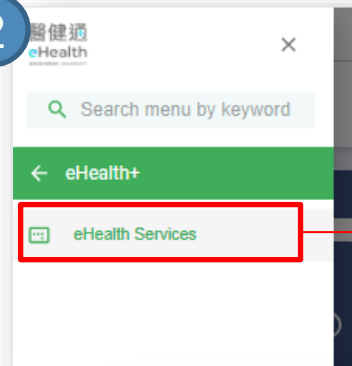
Reimbursement

Reimbursement

1



2



Reimbursement

Ready to reimburse

3

Select Programme to view record

eHealth Services > Reimbursement Management

Programme:

Vaccination Subsidy Scheme

Status:

Ready to reimburse

Reimbursement in Progress / Claimed

Pending Follow-up

Healthcare Service Provider:

Virtual HOSPITAL - VHC4 (4310898234)

Healthcare Service Location:

All

Total Claim(s): 27

Total: \$7,300.00

Reference No.: TG2652200013

All

Amount: \$ 260.00

Participant Name:

TEST, T

PVDR enhancement UAT 62 (2207083534)

Virtual HOSPITAL - VHC4 HSL (4340633980)

St. Paul's Hospital Renal Dialysis Centre (7765444445)

Expand

Reference No.: TG2652200013

VHC4-S ENGLISH HOSPITAL (FULL) HSL (9094642462)

Amount: \$ 260.00

Participant Name:

ABC, ABC

Healthcare Service Provider Name: Virtual HOSPITAL - VHC4

Healthcare Service Location: Virtual HOSPITAL - VHC4 HSL

Expand

Reference No.: TG26519000136401

Service: Vaccination

Date: 19-May-2026

Amount: \$ 260.00

Participant Name:

WONG, PEAR

Healthcare Service Provider Name: Virtual HOSPITAL - VHC4

Healthcare Service Location: Virtual HOSPITAL - VHC4 HSL

Expand

Reference No.: TG26506000058156

Service: Vaccination

Date: 06-May-2026

Amount: \$ 400.00

Participant Name:

YAM, MAN YING MADDALENA

Healthcare Service Provider Name: Virtual HOSPITAL - VHC4

Healthcare Service Location: Virtual HOSPITAL - VHC4 HSL

Service Detail:

• 23vPPV

ONLYDOSE

\$ 400.00

Collapse

The claim record will be displayed in "Ready to reimburse" status **at least 24 hours after** the HCProf confirms the vaccine transaction record.

Select HCP / HSL to filter claim records.

Reimbursement

Reimbursement in progress

4

eHealth Services > Reimbursement Management

Programme:

Vaccination Subsidy Scheme

Status:

Ready to reimburse

Reimbursement in Progress / Claimed

Pending Follow-up

May 2026 As of 02 May 2026	Invoice No.: VSS2026050000003888	Status: Reimbursement In Progress	Invoice Date: -	
	Programme: Vaccination Subsidy Scheme			Detail
May 2026 As of 02 May 2026	Invoice No.: VSS2026050000003900	Status: Reimbursement In Progress	Invoice Date: -	\$ 1,560.00
	Programme: Vaccination Subsidy Scheme			Detail
May 2026 As of 02 May 2026	Invoice No.: VSS2026050000003905	Status: Reimbursement In Progress	Invoice Date: -	\$ 520.00
	Programme: Vaccination Subsidy Scheme			Detail
May 2026 As of 02 May 2026	Invoice No.: VSS2026050000003909	Status: Reimbursement In Progress	Invoice Date: -	\$ 520.00
	Programme: Vaccination Subsidy Scheme			Detail
Apr 2026 As of 28 Apr 2026	Invoice No.: VSS2026040000003886	Status: Claimed	Invoice Date: 06-May-2026	\$ 48,100.00
	Programme: Vaccination Subsidy Scheme			Detail
Apr 2026 As of 28 Apr 2026	Invoice No.: VSS2026040000003401	Status: Claimed	Invoice Date: 06-May-2026	\$ 57,980.00
	Programme: Vaccination Subsidy Scheme			Detail
Apr 2026 As of 28 Apr 2026	Invoice No.: VSS2026040000003407	Status: Claimed	Invoice Date: 06-May-2026	\$ 40,820.00
	Programme: Vaccination Subsidy Scheme			Detail

Reimbursement in progress

Please note that reimbursement is currently in progress.

Claimed

Please note that the reimbursement has been completed.

Reimbursement

Pending Follow-up

5

Health Services > Reimbursement Management

Programme:

Vaccination Subsidy Scheme

Status:

Ready to reimburse

Reimbursement in Progress / Claimed

Pending Follow-up

Adjusted

Adjustment No.: 1000000675 Service: Vaccination Date: 22-Apr-2026 Amount: \$ 5.00 *Adjusted

Adjusted: TG26421000000481

Reason of Adjustment: Others (please specify)

Confirm

Expand

Suspended

Reference No.: TG26421000004390 Service: Vaccination Date: 10-Apr-2026 Amount: \$ 260.00 *Suspended

Participant Name: CHAN, TAI MAN Healthcare Service Provider Name: Virtual HOSPITAL - VHC4

Expand

Please note that if there is an **adjusted record** here, it means the PO has created a payment adjustment.

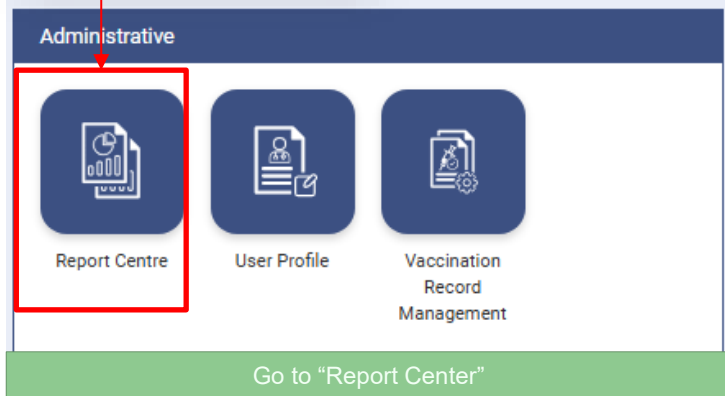
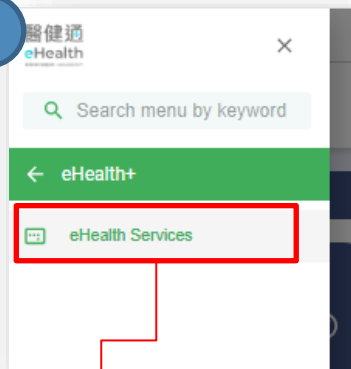
Please check and **confirm** the details; once confirmed, the record will automatically be processed next month.

Please note that if there is a **suspended record** here, its status will be updated accordingly once investigated and verified by the PO.

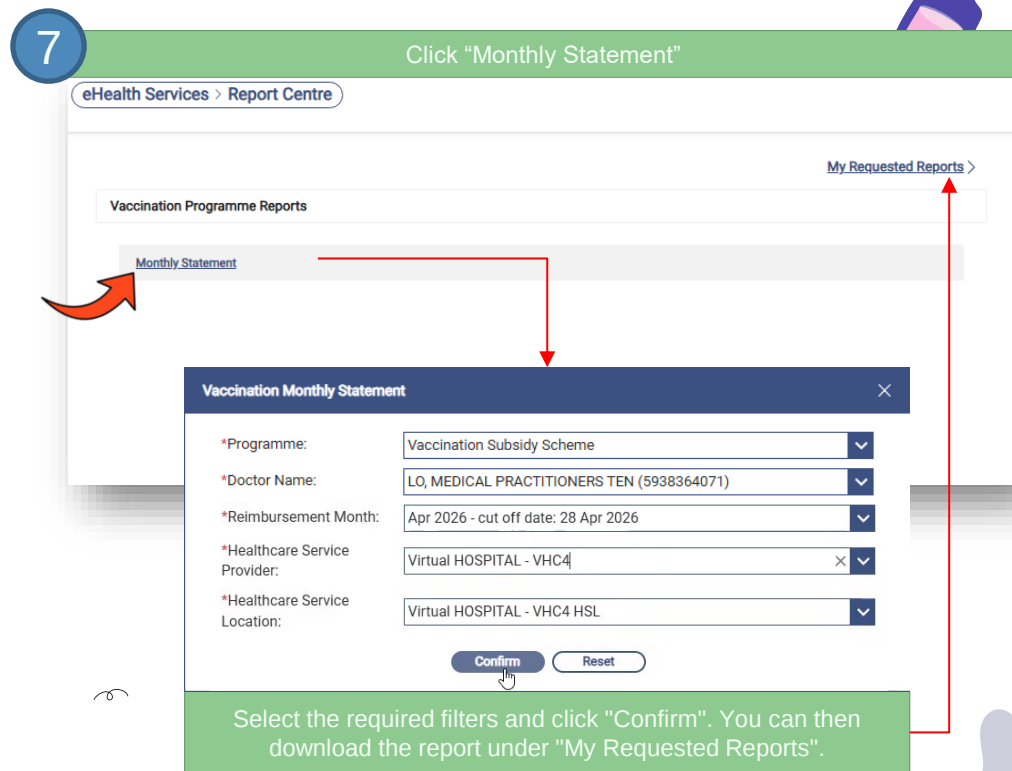
Reimbursement

View Monthly Statement

6



7



Reimbursement

View Monthly Statement

8

Download and View Monthly Statement

eHealth Services > Report Centre > My Requested Reports

Report Name	Requested Date & Time	Status
Monthly Statement	08-Jul-2026 02:34 PM	Ready
Monthly Statement	08-Jul-2026 12:16 PM	Ready
Monthly Statement	08-Jul-2026 12:14 PM	Ready
Monthly Statement	08-Jul-2026 12:12 PM	Ready

< 1 2 3 >

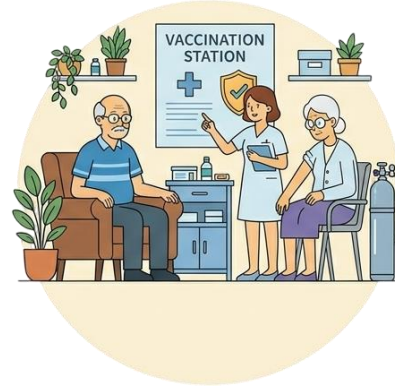


Monthly Statement

Scheme Name :	Vaccination Subsidy Scheme	Report Generate Date & Time :	07 May 2026 16:22
Submission Month :	Feb 2026	Report Generated By User :	TASHOP, ADMIN035(8170744229)
Clinic			
No. of RV:	5		
Sub-total(\$):	1,300		
Adult (Non-Clinic)			
No. of RV:	1		
Sub-total(\$):	260		
Children (Clinic)			
No. of RV:	1		
Sub-total(\$):	260		
Children (Non-Clinic)			
No. of RV:	1		
Sub-total(\$):	260		
Persons aged 65 years or above (Clinic)			
No. of PCVIS:	1		
No. of RV:	1		
Sub-total(\$):	1,060		
Persons aged 65 years or above (Non-Clinic)			
No. of RV:	1		
Sub-total(\$):	260		
Total(\$):	3,400		

Item	Invoice No.	Submission Date	Reimbursement Period	Provider(HCP ID)	Service Location (HCP ID)	User(HCP UID)	Bank Account	Participant Name	RVH No.	Service Received Date	Reference No. (Transaction No.)	Co-payment Amount	Subsidy Amount
1	V5520260200032895	04-May-2026	Claimed	YHCA HOSPITAL - HCP(431088234)	YHCA HOSPITAL - HCP(431088234)	ML989994877	004-123	TAI MAN, CHAN	004-123	15-Jan-2026	T0263300000 06832	123	260
2	V5520260200032895	04-May-2026	Claimed	YHCA HOSPITAL - HCP(431088234)	YHCA HOSPITAL - HCP(431088234)	ML989994877	004-123	TAI MAN, CHAN	004-123	25-Jan-2026	T0263300000 06556	123	260
3	V5520260200032895	04-May-2026	Claimed	YHCA HOSPITAL - HCP(431088234)	YHCA HOSPITAL - HCP(431088234)	ML989994877	004-123	TAI MAN, CHAN	004-123	25-Jan-2026	T0263300000 06528	123	260
4	V5520260200032895	04-May-2026	Claimed	YHCA HOSPITAL - HCP(431088234)	YHCA HOSPITAL - HCP(431088234)	ML989994877	004-123	TAI MAN, CHAN	004-123	25-Jan-2026	T0263300000 06707	123	260
5	V5520260200032895	04-May-2026	Claimed	YHCA HOSPITAL - HCP(431088234)	YHCA HOSPITAL - HCP(431088234)	ML989994877	004-123	TAI MAN, CHAN	004-123	25-Jan-2026	T0263300000 06719	123	260
6	V5520260200032895	04-May-2026	Claimed	YHCA HOSPITAL - HCP(431088234)	YHCA HOSPITAL - HCP(431088234)	ML989994877	004-123	TAI MAN, CHAN	004-123	07-Feb-2026	T0263310000 07283	123	260
7	V5520260200032895	04-May-2026	Claimed	YHCA HOSPITAL - HCP(431088234)	YHCA HOSPITAL - HCP(431088234)	ML989994877	004-123	TAI MAN, CHAN	004-123	21-Feb-2026	T0263300000 07014	123	260

Doctors can view detailed vaccination transactions from the **last 12 times** in the "Monthly Statement".



Thank You !
