

<b>MODERN GENOMIC SERVICES Ltd.</b> Phone 電話: +852 3604 1305 Email 電郵: info@moderngenomic.com Website 網站: www.moderngenomic.com Address 地址: Unit 604- 606, CEO Tower, 77 Wing Hong Street, Cheung Sha Wan, Kowloon, Hong Kong 香港九龍長沙灣永康街 77 號環宇中心 6 樓604-606室	<b>APPLICANT REFERENCE NUMBER</b> <b>申請編號</b>	<b>LAB ID NUMBER 實驗室編號</b> <b>(Lab Use Only) (由實驗室填寫)</b>
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APPLICANT INFO. 申請人資料	姓氏 (英文) <b>LAST NAME (In English)</b> _____	名字 (英文) <b>FIRST NAME (In English)</b> _____	中間名 (英文) <b>MI (In English)</b> _____	
	香港身份證號碼 (如適用) <b>HKID (If any)</b> _____	出生日期 (日日/月月/年年) <b>DOB (DD/MM/YY)</b> _____	年齡 <b>AGE</b> _____	
	電郵地址 <b>E-MAIL</b> _____	聯繫電話 <b>CONTACT No.</b> _____	性別 男/女 <b>SEX M / F</b>	
	樣本採集日期 <b>COLLECTION DATE</b> _____	樣本採集時間 (24小時格式) <b>COLLECTION TIME (24 format)</b> _____		
	樣本採集方法 <b>SPECIMEN TYPE</b>		服務選項 <b>SERVICE LEVEL</b>	

深喉唾液  
**Deep Throat Saliva**

咽喉拭子  
**Throat Swab**

下一個工作日  
**Next working day**

鼻腔拭子  
**Nasal Swab**

鼻咽拭子  
**Nasopharyngeal Swab**

即日  
**Same day**

香港住址  
**RESIDENTIAL ADDRESS (Hong Kong)** \_\_\_\_\_

TEST 測試	<input type="checkbox"/> 非出境(健康申報用途) <b>For screening purposes</b>	<input type="checkbox"/> 出境(健康申報表) <b>For traveling purposes</b>
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Applicants taking the COVID-19 test for travel purpose must fill in the additional information stated below  
 本部分只適用於COVID-19測試用作旅遊的申請人

ADDITIONAL INFO. (FOR TRAVELERS) <small>附加資料 (針對旅客)</small>	<input type="checkbox"/> 報告用於前往美國旅客 <b>Report intended for US travel</b>	<input type="checkbox"/> 報告非用於前往美國旅客 <b>Report intended for Non-US travel</b>	
	中文姓名 (如適用) <b>CHINESE NAME (If any)</b> _____	護照號碼 <b>PASSPORT No.</b> _____	
	旅行證件類型 <b>TRAVEL DOCUMENT TYPE</b> _____	其他旅行證件編號碼 (如適用) <b>OTHER TRAVEL DOCUMENT No. (If any)</b> _____	
	目的地 <b>COUNTRY OF DESTINATION</b> _____	港澳居民來往內地通行證 (回鄉證) 號碼 <b>MAINLAND TRAVEL PERMIT No.</b> _____	
	出發日期 (日日/月月/年年) <b>DEPARTURE DATE (DD/MM/YY)</b> _____	出發時間 (24小時格式) <b>DEPARTURE TIME (24hr format)</b> _____	

<b>PHYSICIAN AUTHORIZATION 醫生授權</b> I authorize to order laboratory tests of COVID-19 for this patient. 我授權為該患者訂購 COVID-19 的實驗室檢查。	
診所名稱 <b>CLINIC NAME</b> _____	診所聯絡號碼 <b>CLINIC CONTACT No.</b> _____
醫生蓋章和簽名 <b>PHYSICIAN STAMP &amp; SIGNATURE</b> _____	日期 <b>DATE</b> _____
醫生提供的參考資料 <b>DOCTOR'S REMARKS</b> _____	

(只供內部使用)  
**For Office Use Only**

SPECIMEN 樣本:

RECEIVED DATE & TIME:  
 接收日期和時間

<b>CONSENT DECLARATION 同意聲明</b> I hereby declare that the nasopharyngeal / deep throat saliva samples from myself or an authorized person are taken according to MGS' instructions. My signature below indicates that I have read and agree with MGS' Terms and Conditions shown on Page 2 of this Test Requisition Form and that I agree to allow the MGS accredited laboratory to carry out the COVID-19 test for me and share the test results with the Hong Kong Department of Health if necessary. 本人特此聲明深喉唾液樣本是根據MGS的指示採集。我下面的簽名表明已經閱讀並同意此測試申請表第2頁上顯示的MGS的條款，並且同意允許MGS認可的實驗室進行COVID-19測試並分享測試結果。如有需要，請與香港衛生署聯絡。	
申請人姓名及簽名 <b>APPLICANT NAME &amp; SIGNATURE</b> _____	日期 <b>DATE</b> _____

RECEIVED BY 收件人:

# TERMS & CONDITIONS

## 條款及細則

樣本以即時聚合酶鏈式反應（RT-PCR）技術進行檢測。本公司所用試劑是以COVID-19 (SARS-CoV-2) 病毒的E基因及/或ORF1ab 基因為檢測目標。定性檢測的陽性結果並不一定代表活性病毒的存在。可考慮以其他檢測方法確認結果。本次檢測僅對新型冠狀病毒COVID-19（前稱2019-nCoV）進行分類及辨認。患者的臨床診斷及治療應視乎其症狀／病徵、病史、其他檢測結果及所考慮的治療反應而定。儘管本次檢測旨在選擇相對保守的片段作擴增及檢測，但理論上，在保守區域中出現罕見基因突變的冠狀病毒類型仍可能會導致漏檢。

The specimen has been tested by Real-Time Polymerase Chain Reaction (RT-PCR) technology. Our detection kit detects the E gene and/or ORF1ab in the COVID-19 (SARS-CoV-2) virus. Qualitative detection of positive results does not indicate the presence of the live virus. Other detection methods can be used for confirmation at the same time. This test only classifies and identifies the new coronavirus COVID-19 (formerly known as 2019-nCoV). The clinical diagnosis and treatment of patients should be combined with their symptoms/signs, medical history, other laboratory tests and treatment responses considering. Although this test was designed to select relatively conservative fragments for amplification and detection, in theory, the missed detection of coronavirus types with rare mutations in the conserved regions is still possible.

陰性結果不能絕對排除閣下曾感染COVID-19病毒的可能性，故不應以此作為治療或健康管理決策的唯一依據。樣本收集、運送或處理不當，均有機會令檢測結果呈假陰性。如果樣本在感染期最初期收集，則閣下體內的病毒顆粒可能未達到實驗室測試的可檢測水平。閣下亦可能在收集樣本後接觸到COVID-19病毒。如果患者最近的行踪或臨床表現顯示有可能感染COVID-19，則應特別注意假陰性結果的可能性。申請人或需要收集多個樣本進行病毒檢測。如仍懷疑受COVID-19感染，應向公共衛生當局諮詢以決定是否需要再作檢測。本次檢測不能排除由其他細菌或病毒病原體引起的疾病。在任何時候，陰性結果均不會排除感染COVID-19的可能性。

A negative result does not eliminate the possibility that you have been exposed to the COVID-19 Virus and should not be used as the sole basis for treatment or applicant management decisions. A false negative may occur if a specimen is improperly collected, transported or handled. If the sample was collected too early in the infection period, the viral particles in your body may not have reached levels that are detectable from the laboratory test. It is also a possibility that you may have been exposed to the COVID-19 Virus after your sample was collected. The possibility of a false negative result should especially be considered if the patient's recent exposures or clinical presentation suggest that COVID-19 infection is possible. Collection of multiple specimens from the same applicant may be necessary to detect the Virus. If COVID-19 infection is still suspected, re-testing should be considered in consultation with public health authorities. This test cannot rule out diseases caused by other bacterial or viral pathogens. A negative result does not at any time preclude the possibility of COVID-19 infection.

COVID-19的檢測申請須經醫生轉介。閣下必須取得轉介醫生的簽名及印章，方可進行正式的檢測申請。如有資料遺漏，我們或會拒絕檢測樣本或延遲檢測。倘「檢測申請表」內並無持牌醫生的印章及簽名，現代基因技術（MGS）將不會發出檢測報告，而檢測結果亦只會將會以電子郵件通知申請人。倘若申請人的檢測結果以電子郵件傳送，則申請人明白有關傳送不被加密且並非保密。申請人進一步確認，有關傳送可能會被第三方截取並在無意中進行修改。MGS概不承擔因利用電子郵件傳送檢測結果而產生或與之相關的任何及所有責任。

Doctor referral is needed for COVID-19 test requisition. Signature and stamp of the referral doctor or clinic are essential for a valid test request. Missing information may result in sample rejection or delay in testing. If the Test Requisition Form does not contain a stamp and signature by a licensed physician, then Modern Genomic Services (MGS) will not issue a test report and will notify the Applicant of the test results by email. If the test results are transmitted through email, the Applicant acknowledges that such transmissions will not be encrypted and will no longer be confidential. The Applicant further acknowledges that such transmissions may be intercepted by third parties and modified inadvertently. MGS disclaims any and all liability arising out of or in connection with email transmissions of the test results.

本報告不構成法律、健康、安全或醫學意見，亦非對採取或不採取任何行動的建議。MGS對樣本收集過程中所造成任何人身傷害概不負責。在任何情況下，本報告引起或與之相關的任何間接、相應而生、特殊或附帶的損害，MGS概不負責。在任何情況下，款項及檢測申請表一經提交，將不獲退款。

This report does not constitute legal, health, safety, or medical advice and is not a recommendation of any action or non-action. MGS is not responsible or liable for any injuries caused during the sample collection procedure. In no circumstances whatsoever shall MGS be liable for any indirect, consequential, special or incidental damages arising out of or in connection with this report. Once payment has been submitted with the test request form, there shall be no refunds in any circumstances.

如有查詢，歡迎致電：+852 2725 6717 / 2666 1802