

### YAN OI TONG Tin Ka Ping Secondary School

## 仁愛堂田家炳中學

Shan King Estate, Tuen Mun, N.T., Hong Kong.

新界屯門山景邨 Tel:2466 5270

No. 18-19/25

敬啟者:

### 注射預防流行性感冒疫苗



為減低學生感染流行性感冒的機會,「全康醫務綜合中心」現為本校學生安排購買預防流感 三價疫苗注射券(下稱「針券」)。詳情如下:

日期、時間及地點: 2018 年 11 月 14 日(星期三) 1:00-2:00pm, 本校有蓋操場 發售針券 費用 : \$120 同學需自行預約並到指定診所注射。 注射 家人或親屬亦可透過 貴子女購買「針券」。 針券有效期至2018年12月31日。針券逾期作廢,不作退款或賠償。 備註 1·「針券」只安排在上述指定日期及時間發售,逾時恕不受理。 2.注射前必須先致電以下其中一間醫務所預約,並須攜同有效針券接受注射。 \*「全康醫務綜合中心」地址: a)屯門柏麗廣場 23 樓 2312 室 電話:2458 8222 b)葵芳葵義路 15 號葵芳閣 3座地下商場 J1 室 電話: 2426 8383 3·是次注射疫苗根據衛生署建議 2018-19 年三價疫苗成份: 類甲型/密歇根 45/2015(HINI)pdm-09 類甲型/新加坡/INFIMH-16-0019/2016 (H3N2) 類乙型/科羅拉多/06/2017

有關「全康醫務綜合中心」提供之任何服務,與本校並無任何關係。選擇注射上述疫苗與否, 全屬家長及學生之意願。因注射疫苗過程或注射疫苗而引致過敏或任何後果,本校概不負上任何民事 或賠償責任,家長及學生必須自行評估,謹慎選擇。如對醫學、醫療或診斷方面有疑問,務必先向執 業家庭醫生查詢。

如有垂詢有關購買預防流感疫苗	苗注射券之安排,請聯絡問承良老師。	
此致 各家長		
	仁愛堂田家均	丙中學校長
	吳	潔容謹啟
二零一八年十一月五日 -X		
-X	回 條 (12/11 交回班主任)	<b>—</b>
敬覆者:本人已得悉有關注射預防流	<b>允感疫苗事宜,並</b>	回條必須簽回
□ 購買「針券」	_張(學生於十一月十四日自備款項到有蓋操場購買)	
□ 不需要購買「針券」		
* (請 ✓適用□)		
此覆		
仁爱堂田家炳中學校長	班別: 座號:	
	學生:	
二零一八年十一月 日	家長簽署:	
	N 10 10 /0F	

No. 18-19/25



Sale of

<u>Vaccine</u>

**Vouchers** 

Time, Date & Place:

Vaccination provider:

Fee:

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\$120

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#### **Influenza vaccination**

1:00-2:00pm, 14<sup>th</sup> November 2018 (Wednesday), covered playground

To minimise the students' chance of being infected with influenza, our school has invited the ADEC Medical Alliance to provide trivalent vaccine for our students. The details are as follows:

**ADEC Medical Alliance** 

<u>Vaccination</u>	<u>n</u>	Students are to be vaccinated at one of	Students are to be vaccinated at one of the designated clinics shown below.					
		Family or relatives may also buy vaccine vouchers through their children.						
		The vouchers are valid until 31 <sup>st</sup> Decer	mber 2018.					
Remarks:	1.	. The vaccine vouchers will only be sold on the date and the specified above. Purchase						
		thereafter will not be entertained.						
	2.	For vaccination, appointment must be	e made with one of th	ne following clin	ics beforehand.	Vaccine		
		voucher must also be presented for vaccination.  * ADEC Medical Alliance						
		a) Room 2312, 23/F,Tuen Mun Parklane	a) Room 2312, 23/F,Tuen Mun Parklane Square, Phase II, Tuen Mun Telephone: 2458 8222					
		b) Shop J1, G/F, Blk 3, Kwai Fong Terrace, 15 Kwai Yi Road, Kwai Chung Telephone: 2426 8383						
	3.	The ingredients of the vaccine is advised by the Department of Health (2018-19):						
		A/Michigan/45/2015 (H1N1)pdm09						
		A/Singapore/INFIMH-16-0019/2016 (H	13N2)					
		B/Colorado/06/2017						
For end	quirie	s, please contact Mr. Chow Wing Leung	at 2464 3731.		Ng Kit Yung			
					Principal			
		×				====		
		Reply Slip (To be returne						
				Novemb	per 2018			
I am notifie	d of	the arrangements about the influen	za vaccination and	<u></u>	1	reply slip for be returned		
		ntend to buy (number) verady in cash and pay at the covered			have the paym	nent		
	] w	vill not buy any vaccine vouchers.						
		(Please ✓ as appropriate)	Class:	No.:	_			
			Name of student:					
			Parent's signature	e:				

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