

THE HONG KONG COLLEGE OF PAEDIATRICIANS  
(Incorporated in Hong Kong with Limited Liabilities)

Working Group for Paediatric Subspecialty Accreditation

**Application for the Accreditation of the Subspecialty of Paediatric Immunology and Infectious Diseases**

**1. Declaration :**

- 1.1 We, the undersigned, would like to apply for accreditation of the subspecialty of Paediatric Immunology and Infectious Diseases, this being new and different from existing subspecialties.
- 1.2 We submit that the subspecialty is needed in Hong Kong.
- Proposed manpower estimates:
- (i) 11-12 Fellows could be qualified as First Fellow
  - (ii) 11-12 subspecialists existed.
  - (iii) 26 subspecialists projected as required locally in the next 10 years.
- 1.3 This subspecialty also exists in other countries such as United Kingdom (country A) and United States of America (country B).
- (i) 31 paediatric specialists are existing in United Kingdom (country A) i.e. 3-4 in 1 million (population of age <18); and ≥ 180 in the State of California, USA (country B) i.e. 5.2 in 1 million (population)

**2. Justification for establishment of subspecialty :**

We have also submitted a descriptive narrative, stating that our subspecialty satisfies all the criteria laid down by the Academy of Medicine for the recognition of a subspecialty (**Appendix I**).

- (i) the subspecialty is needed in Hong Kong
- (ii) the subspecialty is new and different from existing subspecialties
- (iii) the knowledge, skills and practice required by that subspecialty are identifiably distinct and are deemed appropriate and compatible with the practice of paediatrics
- (iv) the subspecialty exists in other countries
- (v) the subspecialty is recognized at the institutional level; with the appointment of academic staff for that subspecialty at the Associate Professor level in a university in Hong Kong or the appointment of a Consultant for that subspecialty in one of the Hospital Authority Hospitals or the Department of Health
- (vi) the subspecialty has the administrative support of one or more constituent Colleges of the Academy.

Please also include justification for the subspecialty to be recognized and that the subspecialty has enough members, activities, a training programme ready for accreditation and unanimous agreement of the programme by all Fellows interested in the subspecialty.

### 3. Proposed training programme :

3.1 We propose the training programme would be 3 years with a minimum of 30 months of full clinical activities.

3.2 One proposed training programme within the territory of HK would be adequate at any one time.

3.3 We provide local statistics for our subspecialty:

a. Estimated patient load in Hong Kong:

i. Inpatients - new cases/month:

- ☐ <5
- ☐ 6-10
- ☐ 10-15
- ☐ 16-20
- ☐ 21-25
- ☐ 26-30
- ☒ >30

ii. Outpatient attendance- new cases/month

- ☐ <5
- ☐ 6-10
- ☐ 10-15
- ☐ 16-20
- ☐ 21-25
- ☐ 26-30
- ☒ >30

iii. Outpatient attendance- old cases/month

- ☐ < 20
- ☐ 21-40
- ☐ 41-60
- ☐ 61-80
- ☐ 81-100
- ☒ > 100

iv. Estimated number of cases in general population:

> 500 acute hospital

admissions / consultations per 1 million per year

b. Local facilities:

i. Designated inpatient bed numbers (N/A if not applicable):

|   |   |
|---|---|
| 24 beds in HAIDC, PMH<br>(all negative pressure<br>isolation rooms, 2 PICU<br>beds) | (please specify number)<br>(please specify type: eg neonataology,<br>haematology-oncology, renal, PICU,<br>etc) |
|---|---|

24-30 beds in QMH [10  
negative pressure  
isolation rooms (8 in  
general ward and 2 in  
ICU)]

16 beds in PWH (9  
negative pressure  
isolation rooms)

14 beds in QEH (10  
negative pressure 2 ICU)

Variable number of  
isolation rooms available  
in most HA hospitals

Bone Marrow  
Transplantation setup  
available in 2 university  
hospitals for patients with  
primary  
immunodeficiencies and  
autoimmune disorders

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ii. Designated outpatient attendance per month

|            |                                      |
|------------|--------------------------------------|
| 16-24 (ID) | (please specify number of new cases) |
|------------|--------------------------------------|

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60-64 (Immunology)

|          |                                      |
|----------|--------------------------------------|
| 100 (ID) | (please specify number of old cases) |
|----------|--------------------------------------|

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220 (Immunology)

|         |                                  |
|---------|----------------------------------|
| 15 (ID) | (please specify frequency of out |
|---------|----------------------------------|

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21 (Immunology) patient clinics)

iii. Details of facilities relevant to the subspecialty (eg diagnostic laboratories, electrophysiology laboratories, imaging facilities): (please specify number and type of facilities)

Type of facilities

Number

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Microbiology laboratories

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Most HA hospitals

|                         |                   |
|-------------------------|-------------------|
| Virology laboratories   | 3                 |
| Immunology laboratories | 2                 |
| Imaging facilities      | Most HA hospitals |

iv. Details of facilities might need to be given – subspecialty specific:  
(e.g. Neonatology: ventilator bed, paediatric surgery etc) (please specify)

| Type of facilities             | Number               |
|--------------------------------|----------------------|
| P/NICU                         | At least 8 in HA     |
| Bone marrow transplant centres | 2 (QMH and PWH)      |
| Paediatric surgical centres    | 3 (QMH, PWH and QEH) |

c. Resources

v. The development of this subspecialty requires extra resources  
☒ Yes    ☐ No

If yes the extra resources include:

1. Manpower  
☒ Yes    ☐ No
2. Equipment  
☐ Yes    ☒ No
3. Space for use by subspecialty
  - i) Bed space  
☐ Yes    ☒ No
  - ii) Laboratory space  
☐ Yes    ☒ No
  - iii) Rehabilitation space  
☐ Yes    ☒ No
  - iv) Others:  
☒ Yes    ☐ No

If yes, please specify:

Laboratory support and public health / epidemiology  
support system

d. Manpower

- |     |  |  |
|-----|--|--|
| i)  | Number of subspecialists needed in Hong Kong                               | 26   |
| ii) | Number of peer-recognized subspecialists currently practicing in Hong Kong | 11-12 (in HA hospitals)<br>At least 2 in private |



|  | sector      |
|--|-------------|
| iii) Number of Paediatricians currently practicing this subspecialty                                   | At least 12 |
| iv) Number of trainees that need to be trained to meet the current need                                | 14-15       |
| v) Number of qualified trainers currently available  | 11-12       |
| vi) Number of trainees that can be accommodated with the existing provision of manpower and facilities | 3-4         |
| vii) Number of trainees currently under training in this subspecialty                                  | 5           |

### 3.4 Career structure

Based on the analysis of the above information, we deduce the following:

|   |   |
|---|---|
| 1. Number of fully-trained subspecialists in infectious disease / immunology required for whole of Hong Kong  | 26  |
| 2. Number of subspecialist trainees required to be trained after their FHKAM (Paediatrics) Fellowship Exit Examination in order to maintain a steady state in the next 10 years (i.e. all fully-trained subspecialists can function full-time in that subspecialty and the “a” can be reached just right), taking into account of retirement and projection of needs in the next 10 years, etc. | 14-15                                     |
| 3. Number of fellows (FHKAM Paediatrics) required to be working with the subspecialists to reach a desirable level of service and training for the whole of Hong Kong.  | 14-15                                     |
| 4. Number of trainees (pre-fellows) required to be working in the subspecialty to reach a desirable level of service and training for the whole of Hong Kong.   | Share with general paediatrics            |
| 5. Number of centres or clustered network required for this subspecialty in the whole of Hong Kong.   | 3-4 training units (1 training programme) |

3.5 We also submit additional information on the justification of establishment of our subspecialty, with reference to:

#### 3.51 Curriculum:

##### a) Duration of subspecialty training

- ☐ 2 years post-higher training in general paediatrics
- ☒ 3 years (incorporating 1 year of training in that particular subspecialty during the higher training in general paediatrics and 2 years of extra subspecialty training)

b) Maximum duration of recognition for specified qualification or training within the subspecialty training programme is **6 months** for:

|      |                | Yes  | No                       |
|------|----------------|--|--------------------------|
| i)   | Ph. D          | √  | <input type="checkbox"/> |
| ii)  | M. Phil.       | √  | <input type="checkbox"/> |
| iii) | M. Med. Sc.    | √  | <input type="checkbox"/> |
| iv)  | Others         | √  | <input type="checkbox"/> |
|      | Please specify | Postgraduate Diploma in Infectious Diseases (HKU)                      |                          |
|      |                | Diploma In Paediatric Infectious Diseases (University of Oxford)       |                          |
|      |                | MSc/Postgraduate Diploma in Infectious Diseases (University of London) |                          |

c) Clinical experience

i) Minimum

- ☐ 24 months  
☒ 30 months  
☐ 36 months

ii) Maximum

- ☐ 24 months  
☐ 30 months  
☒ 36 months

iii) Minimum number of new out-patient consultation in that subspecialty during the whole period of subspecialty training

- ☐ 50-100  
☒ 100-150  
☐ 150-200  
☐ 200-300  
☐ Others

Please specify \_\_\_\_\_

iv) Minimum number of old out-patient consultation in that subspecialty during the whole period of subspecialty training

- ☐ 300-400  
☐ 400-500  
☐ 500-600  
☐ 600-700  
☒ 700-800

☐ Others

Please specify \_\_\_\_\_

v) Minimum number of subspecialty clinics per week

☒ 1 (per training unit)

☐ 2

☐ 3

☐ 4

vi) Necessity of log sheet or log book

☐ Yes ☒ No

vii) Availability of checklist for minimum number of special procedures for that subspecialty

☐ Yes\* ☒ No (check list not applicable)

d) Research activities required

☒ Yes ☐ No

If yes,

(i) Clinical research programme

☒ Yes ☐ No

(ii) Basic research programme (eg. laboratory experience)

☐ Yes ☒ No

If yes, please specify minimum duration

☐ 6 months

☐ 12 months

Please also specify maximum duration allowed

☐ 6 months

☐ 12 months

e) Teaching required

☒ Yes ☐ No

If yes, please specify minimum percentage of time

☒ 5%

☐ 10%

☐ 15%

☐ Others

Please specify \_\_\_\_\_

Please also specify maximum percentage allowed

☐ 10%

☒ 15%

☐ 20%

☐ Others

Please specify \_\_\_\_\_



- i) Undergraduate  
☒ Yes    ☐ No
- ii) Postgraduate  
☒ Yes    ☐ No

f) Administration within subspecialty (eg medical audit, involvement of service development, co-ordination & administration within subspecialty)

☒ Yes    ☐ No

If yes, please specify minimum percentage of time

- ☒ 5%  
☐ 10%  
☐ 15%  
☐ Others

Please specify \_\_\_\_\_

Please also specify maximum percentage allowed

- ☒ 10%  
☐ 15%  
☐ 20%  
☐ Others

Please specify \_\_\_\_\_

g) Subspecialty training is done in

- ☐ two centres  
☒ more than two centres QMH    PMH    PWH    QEH

h) Overseas training required

☒ Yes    ☐ No

If yes, what is the minimum duration?

- ☐ 3mths  
☒ 6mths  
☐ 12mths  
☐ Others:

Please specify \_\_\_\_\_

If yes, please also describe

- (i) Setting    Tertiary care facilities with a recognized training programme  
(ii) Objectives    To broaden clinical and laboratory experience in the diagnosis, treatment and prevention of pediatric infectious diseases / diagnosis and management of immunologic and allergic disorders

i) Pre-set curriculum for their elective period

☐ Yes    ☒ No (but preferred options will be advised by Training Director)

### 3.52 Assessment of training :

#### a) Portfolio assessment

√ Yes    ☐ No

If yes, please describe

|   |                          |     |                          |    |
|---|--------------------------|-----|--------------------------|----|
| (i) Oral                                | √                        | Yes | <input type="checkbox"/> | No |
| (ii) Written                            | √                        | Yes | <input type="checkbox"/> | No |
| (iii) Course work                       | <input type="checkbox"/> | Yes | √                        | No |
| (iv) Postgraduate Degree or Certificate | <input type="checkbox"/> | Yes | √                        | No |
| (v) Published papers                    | √                        | Yes | <input type="checkbox"/> | No |

### 3.6 Institution / Functional Training Unit

#### 3.61 Please describe the statistics for EACH Programme :

|  |  | Comments |
|--|--|----------|
| 1. Case load per year  | >1000 hospital admissions /<br>in-patient consultations<br>900-1000 new out-patients<br>3000-4000 old out-patients |          |
| 2. Case profile – Infectious<br>Disease<br><br>Case profile – Immunology                           | * Highly complex      10    %  |          |
|  | * Complex              10    %   |          |
|  | * Intermediate        30    %  |          |
|  | * Simple                50    %  |          |
|  | * Highly complex      10    %  |          |
|  | * Complex              20    %   |          |
|  | * Intermediate        30    %  |          |
|  | * Simple                40    %  |          |
| a) No. of specialists working in<br>the programme  | 11-12  |          |
| b) <u>  ≥ 50  </u> % of time working<br>in the subspecialty  | 8  |          |
| 3. No. of sub-specialists (FTE)<br>(FTE = at least 35-50% of time<br>working in the sub-specialty) | 11-12  |          |
| 4. Having a structure for centre<br>e.g. Director on service, training<br>or research etc.         | √ Yes <input type="checkbox"/> No <input type="checkbox"/> NA  |          |
| 5. No. of trainees   | 9-12 in 10 years   |          |
| 6. No. of supporting staff<br>(Please specify)   | e.g. Clinical<br>psychologist  |          |

|                                  |   |  |  |
|----------------------------------|---|--|--|
|                                  | Scientific officer  |  |  |
|                                  | Therapists  |  |  |
|                                  | Research fellows/assistants                                   |  |  |
|                                  |   |  |  |
|                                  |   |  |  |
| 7. Structured training programme | √ Yes <input type="checkbox"/> No <input type="checkbox"/> NA |  |  |
| 8. Clinical guidelines/protocols | √ Yes <input type="checkbox"/> No <input type="checkbox"/> NA |  |  |
| 9. Clinical audit                | √ Yes <input type="checkbox"/> No <input type="checkbox"/> NA |  |  |
| 10. Research projects – No.      | 1   |  |  |

\*Highly complex – requires advanced knowledge and considerable experience for optimal management, often rare or uncommon conditions demanding sophisticated diagnostic techniques, complicated treatment regimen and multidisciplinary team approach

eg. Primary immunodeficiency syndromes, HIV / AIDS, bone marrow transplant, infections in stem cell transplant or solid organ transplant recipients, graft-versus-host disease, lymphoproliferative disorders

\*Complex – requires special diagnostic tests and careful therapeutic monitoring, or newly identified conditions with diagnosis and treatment under development

eg. multi-drug resistant bacterial infections, multi-drug resistant tuberculosis, infective endocarditis, infections in immunocompromised hosts (excluding transplant recipients), SARS, highly pathogenic avian influenza, systemic lupus erythematosus, mixed connective tissue disorders, allergen desensitization

\*Intermediate – serious or life-threatening systemic or organ-specific disorders, or conditions requiring extensive diagnostic evaluation

eg. tuberculosis, fever of unknown origin, periodic fever syndromes, meningitis, meningoencephalitis, sepsis, congenital infections, empyema, shunt infections, infections due to antibiotic resistant organisms, EV 71 infection, Kawasaki disease, organ-specific autoimmunity, anaphylaxis and anaphylactoid reactions, vaccine reactions, food and drug allergy, Stevens Johnson syndrome

\*Simple – common conditions that are generally managed at secondary level if hospitalization is required, and diagnosis and treatment are straight forward

eg. common respiratory infections, gastroenteritis, urinary tract infections, common childhood exanthemata, allergic rhinitis, atopic dermatitis



### 3.7 Supportive Service considered as mandatory to the programme:

|  |     |                          |                          |                          |                          |                          |                          | Comments |
|--|-----|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|----------|
| 1. Coordination with other relevant paediatric subspecialties (please specify) |     |                          |                          |                          |                          |                          |                          |          |
|  | Yes | No                       | NA                       | Emergency                | Elective                 | On site                  | Other Location           |          |
| e.g. PICU/NICU   | √   | <input type="checkbox"/> | <input type="checkbox"/> | √                        | <input type="checkbox"/> | √                        | <input type="checkbox"/> |          |
| Medical subspecialties   | √   | <input type="checkbox"/> | <input type="checkbox"/> | √                        | √                        | √                        | <input type="checkbox"/> |          |
| Surgical subspecialties  | √   | <input type="checkbox"/> | <input type="checkbox"/> | √                        | √                        | <input type="checkbox"/> | √                        |          |
| Orthopaedic subspecialties   | √   | <input type="checkbox"/> | <input type="checkbox"/> | √                        | √                        | √                        | <input type="checkbox"/> |          |
| Oncology   | √   | <input type="checkbox"/> | <input type="checkbox"/> | √                        | √                        | <input type="checkbox"/> | √                        |          |
| Transplant   | √   | <input type="checkbox"/> | <input type="checkbox"/> | √                        | √                        | <input type="checkbox"/> | √                        |          |
| Others (please specify)  |     |                          |                          |                          |                          |                          |                          |          |
|  |     |                          |                          |                          |                          |                          |                          |          |
| 2. Special investigatory support   |     |                          |                          |                          |                          |                          |                          |          |
| a. Laboratory  |     |                          |                          |                          |                          |                          |                          |          |
|  | Yes | No                       | NA                       | Emergency                | Elective                 | On site                  | Other Location           |          |
| Chemical pathology   | √   | <input type="checkbox"/> | <input type="checkbox"/> | √                        | √                        | √                        | <input type="checkbox"/> |          |
| Histo-pathology  | √   | <input type="checkbox"/> | <input type="checkbox"/> | √                        | √                        | √                        | <input type="checkbox"/> |          |
| Microbiology   | √   | <input type="checkbox"/> | <input type="checkbox"/> | √                        | √                        | √                        | <input type="checkbox"/> |          |
| Immunology   | √   | <input type="checkbox"/> | <input type="checkbox"/> | √                        | √                        |                          | √                        |          |
| Others (please specify)  |     |                          |                          |                          |                          |                          |                          |          |
|  |     |                          |                          |                          |                          |                          |                          |          |
| b. Radiology   |     |                          |                          |                          |                          |                          |                          |          |
| US   | √   | <input type="checkbox"/> | <input type="checkbox"/> | √                        | √                        | √                        | <input type="checkbox"/> |          |
| CT   | √   | <input type="checkbox"/> | <input type="checkbox"/> | √                        | √                        | √                        | <input type="checkbox"/> |          |
| MRI  | √   | <input type="checkbox"/> | <input type="checkbox"/> | √                        | √                        | √                        | <input type="checkbox"/> |          |
| Isotope Scan   | √   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | √                        | <input type="checkbox"/> | √                        |          |
| Others (please specify)  |     |                          |                          |                          |                          |                          |                          |          |
|  |     |                          |                          |                          |                          |                          |                          |          |
| 3. Special therapeutic support   |     |                          |                          |                          |                          |                          |                          |          |
| Radiotherapy   | √   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | √                        | <input type="checkbox"/> | √                        |          |
| Interventional radiology   | √   | <input type="checkbox"/> | <input type="checkbox"/> | √                        | √                        | √                        | <input type="checkbox"/> |          |
| Chemotherapy   | √   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | √                        | √                        | <input type="checkbox"/> |          |
| Pharmacy   | √   | <input type="checkbox"/> | <input type="checkbox"/> | √                        | <input type="checkbox"/> | √                        | <input type="checkbox"/> |          |



|  |   |                          |                          |                          |   |   |                          |  |
|--|---|--------------------------|--------------------------|--------------------------|---|---|--------------------------|--|
| Total parenteral nutrition   | √ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | √ | √ | <input type="checkbox"/> |  |
| Nutritionist   | √ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | √ | √ | <input type="checkbox"/> |  |
| Clinical psychologist  | √ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | √ | √ | <input type="checkbox"/> |  |
| Medical Social workers   | √ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | √ | √ | <input type="checkbox"/> |  |
| Allied health  | √ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | √ | √ | <input type="checkbox"/> |  |
| Others (please specify)  |   |                          |                          |                          |   |   |                          |  |
|  |   |                          |                          |                          |   |   |                          |  |
| 4. Special management modalities (eg Parents support groups ) (Please specify) |   |                          |                          |                          |   |   |                          |  |
|  |   |                          |                          |                          |   |   |                          |  |

### 3.8 Proposed requirement of Trainers

a) Number of training staff in a centre recommended :

- ☐ 1  
☒ 2-3  
☐ 3-4  
☐ >4

Please specify \_\_\_\_\_

b) In possession of the necessary skills in laboratory, special procedure or basic sciences practice

- ☐ Yes      ☒ No

c) Active in carrying out clinical audit and setting up of management guidelines

- ☒ Yes      ☐ No

### 3.9 Proposed educational activities:

|                      | <u>Location</u>   | <u>Frequency</u>                 |
|----------------------|---|----------------------------------|
| Grand Round          | Interhospital   | Monthly                          |
| Journal Club         | Interhospital   | Monthly                          |
| Audit                | Interhospital or local  | Every 6-12 months                |
| Other CME Activities | Training days   | 2 days every 2 years             |
|                      | Hong Kong Society for Paediatric Immunology and Infectious Diseases                                 | Scientific meetings as announced |
|                      | Overseas training course (eg. Hot Topics of Infection and Immunity in Children – the Oxford Course) | Yearly                           |

3.10 The field of research available in our subspecialty and existing in HK  
(please describe in details) :

(i) Clinical

QMH

Streptococcal pneumoniae carriage in young children  
Influenza and febrile seizures  
Viral triggers of asthma exacerbation

PMH

Human swine influenza, avian influenza and SARS –  
clinical manifestations, complications, diagnosis, treatment  
and outcome  
Measles in young infants  
Complications of varicella and EV71 infection in  
hospitalized children  
Complications of BCG vaccination

PWH

Food allergy and skin diseases

(ii) Laboratory

QMH

Immune response to microbial infections – HIV and  
Mycobacterial interactions  
  
Immunopathogenesis of human avian influenza infection  
  
Biology of interferon and cytokines - signaling pathways  
and gene regulation  
  
Immunogenetics of SLE  
  
Genetic diagnosis of primary immunodeficiency

(iii) Epidemiological

PWH

Epidemiology, genetics and basic mechanisms of asthma  
and other atopic disorders

PMH

Epidemiology of measles, chickenpox and human swine  
influenza in Hong Kong

QMH

1.viral respiratory infections in hospitalized children  
2.population-based hospitalization disease burden study of  
common respiratory viruses.  
3. study on the impact of influenza vaccination on  
hospitalization disease burden  
4. study on the impact of pcv-7 on nasal carriage of  
pneumococcus and staph aureus.

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5. Primary immunodeficiency China Asia Registry

6. Prevalence study of food allergy

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(iv)

Biopharmaceutical  
research

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QMH and PMH

Vaccine studies (influenza, rotavirus, varicella vaccine)

Antiviral treatment for emerging viral infections e.g. SARS

QMH

Platform Technology for investigating Bioactive Molecules  
from Natural Products

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- 3.11 5 candidates are potential programme director(s) for HK ( $\geq 50\%$  of time spent on subspecialty)
- 3.12 12 candidates are potential trainers of the programme
- 3.13 We submit in details the curriculum of our subspecialty training programme under the headings of knowledge, skills and attitudes as Appendix II (on describing the training programme, please take reference from the handbook of Guideline on Postgraduate Training & Accreditation published by the College).

**4. We propose the following as external assessors of our programme:**

**Nigel Klein** BSc, MBBS, MRCP, PhD, FRCPCH

Professor of Infectious Diseases and Microbiology

Institute of Child Health, University College London

Honorary Consultant

Great Ormond Street Hospital NHS Trust

United Kingdom

**Vas Novelli** FRACP, FRCP, FRCPCH

Senior Consultant in Paediatric Infectious Diseases

Great Ormond Street Hospital NHS Trust

Honorary Senior Lecturer

Institute of Child Health, University College London

United Kingdom

**David Isaacs**, FRACP

Clinical Professor in Paediatric Infectious Diseases

The University of Sydney

Senior Staff Specialist

The Children's Hospital at Westmead

Australia

On behalf of the core group of Paediatric Immunology and Infectious Diseases subspecialty.



Co-ordinators of the subspecialty:



Prof. Lau Yu Lung



Dr. Leung Chi Wai



Dr Chow Chun Bong



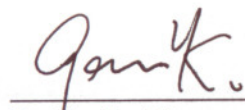
Prof. Allan Lau



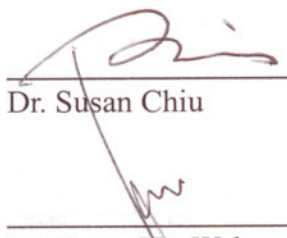
Dr. Susan Chiu



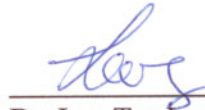
Prof. Leung Ting Fan



Dr. Ko Po Wan



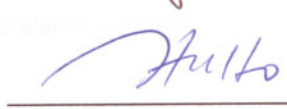
Dr. Kwan Yat Wah



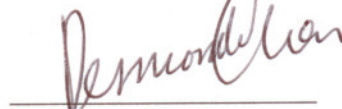
Dr. Lee Tsz Leung



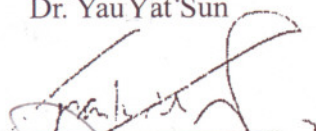
Dr. Yau Yat Sun



Dr. Marco HK Ho



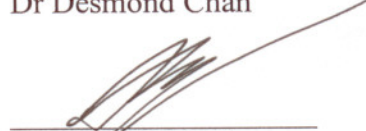
Dr Desmond Chan



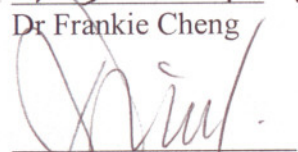
Dr Frankie Cheng



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