## Accredited Provider of Continuing Professional Development for Registered Medical Laboratory Technologists

Report Summary Sheet on Continuing Professional Development (CPD) Programmes/Activities

Month / Year Month / Year (Note)

Note: 1.		must submit data about their CPD activities annually or as and when requested by the										
2.	Wrap words within the ce	Il but do not merge cells. 3. Do not protect the workbook/worksheet with p	password.									
Name of the Accredited Provider		The Hong Kong Society for Microbiology and Infection				Accredited Period		1 Jan 2005 - 31 Dec 2007				
Programme/ Activity Code	Date	Programme/Activity Title	Name of Person(s) involved in Planning	Objectives	Total CPD Credit Points	Cate- gory	Time Theory (Hrs / Days)	Frame Practical (Hrs / Days)	Speaker(s) [Name(s) & Professional Qualifications]	Parti-	Estimated Venue Capacity	Remarks
18060011	18th January, 2006	Annual General Meeting & Annual Scientific Meeting	Yam WC		1							
18060021	28th August, 2006	Joint Scientific Meeting	Yam WC		1							