

Room 1725A, 17 th floor, phase I, The Grand Plaza Mong Kok, Kowloon Tel: 23532180 Fax 2352 2666

Hong Kong Endoscopy Centre

**Endoscopist Booking Form D**

**Booking Information**

Appointment Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Prefer Time:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Operations:** (please tick)

OGD\_\_\_\_\_ Colonoscopy\_\_\_\_\_ Cystoscopy\_\_\_\_\_ ESD\_\_\_\_\_ EUS\_\_\_\_\_ Capsule Endoscopy\_\_\_\_\_

Is anesthetist required? \_\_\_\_Y \_\_\_\_N

Remark: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 **Endoscopist’s Information**

Endoscopist’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Company name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Tel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_