Account Managemnet

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2. Account Management

- I Account Registration
- i. New User Account
- Note For applicants who have chosen to create new user account by submitted the "e-CTS Account Registration Form" to Drug Office, it is NOT necessary to perform steps described in this section.
- 2. Please see details below to create new user account via the system:
- Go to the Login page of e-CTS
- e-CTS Login page Link: <u>https://www.drugoffice.gov.hk/CTCInterWeb/jsp/</u>

1. Click "Apply user account"

Department of length The Government of the Hong Kong Special Administrative Region	KONE
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Electronic Clinical Trial System (e-CTS)	
Points to note: Points to note: Password: Points to note: Points to note: Points to note: Points to note: Points to not	
Install and computer the require software: • Install and computer the require software: • Install and computer the requires software: • Web browser: softmas: <u>Software Clear</u> • The private key and the PIN of your e-Cert will not be transmitted during the transaction. • You should be alert to your surroundings before entering any personal information. Make	
 You should disable pottors on your browser to avoid storing or retaining your e-Cert password on the personal computer. Each intended user(s) in supervisor role for CTC requires applying the organizational/versonal e-cert individually, please refer to the following link to HongKong Post (How to Apply/Renew e-Cert) 	
To be completed in block letters or traditional Chinese.	rrss and Conditions Varsion 0.2022/0520_474

2. Read the Statement of Purposes and put a tick in the declaration box

Statement of Purposes

Purpose of Collection

1. The personal data provided by certificate applicants are for the purposes of application for certificate under the Pharmacy and Poisons Ordinance. The personal data provided will be used by the Department of Health for the following purposes:

(a) Proof of eligibility for a certificate
 (b) Assessment of whether the applicant is a fit and proper person to be granted a certificate

The provision of personal data is voluntary. If you do not provide sufficient information, we may not be able to prove your eligibility for a certificate, or to assess whether you are a fit and proper person to be granted a certificate.

Classes of Transferees

3. The personal data you provide are mainly for use within the Department of Health and the Pharmacy and Poisons Board. Apart from this, the data may only be disclosed to parties where you have given consent to such disclosure or where such disclosure is allowed under the Personal Data (Privacy) Ordinance.

Access to Personal Data 4. You have a right of access and correction with respect to the personal data as provided in sections 18 and 22 and Principle 6 of Schedule 1 of the Personal Data (Privacy) Ordinance. Your right of access includes the right to obtain a copy of your personal data. A fee may be imposed for complying with a data access request.

Enquiries 5. Enquiries concerning the provided personal data, including the making of access and corrections, should be addressed to:

Senior Pharmacist Drug Evaluation and Import/Export Control Division Drug Office, Department of Health Suite 2002-05, 20/F AIA Kowloon Tower, Landmark East, 100 How Ming Street Kwun Tong, Kowloon Tel: 3974 4180

	✓ I have read and agree to be legally bound by the above Terms.
2	Continue Cancel

Click "Continue" button 3.

I have read and agree to be legally bound by the above Terms.



For WDL Holder Account (Organisational Applicants), please see details below:

1. Select "WDL Holder" Option

9 WL	DL Holder O Investigator					
	Name of Organization (English):" Name of Organization (Chinese): Business Registration Certificate Number:" Office Address:"			 Proposed User ID:* User Name:* Tel. No.:* Fax: Email:* 		
				Primary account:	(* Email must be sa Hongkong Post e-Ce	ert's email addres
Supj	porting Document(s)			Primary account:	(° Enair must be sa Hongkong Post e-Ce Ƴ ✔	rrt's email addres
Supj	porting Document(s) Document Description		Uploa	Primary account:	Hongkong Post e-Ce	Acti
Supj No.	Document(s) Document Description Copy of wholesale dealer licence, antibiotics p whenever applicable	ermit, wholesale dealer licence to supply DD,	Uploa	Primary account:	Angkong Post e-Ce	Acti
Sup; No. L *	Document(s) Document Description Copy of wholesale dealer licence, antibiotics p whenever applicable Others	ermit, wholesale dealer licence to supply DD,	Uploa	Primary account:	Hongkong Post e-Ce	Acti

- 2. Fill-in Name of Organization (English) e.g. ABC Pharmaceutical Co. Ltd. and/or
- 3. (Optional) Fill-in Name of Organization (Chinese) and
- 4. Fill-in Business Registration Certificate Number and
- 5. Fill-in Office Address and

Account	Registration	Application
---------	--------------	-------------

O WI	DL Holder O Investigator		
Ð	Name of Organization (English):*	Proposed User ID:* User	
Ð	Name of Organization (Chinese):		
Ð	Business Registration Certificate Number 2–5	Fax: Email:*	
Ð	Office Address:"	(* Email must be same as the Hongkong Post e-Cert's email address)	
Sup	porting Document(s)		
No.	Document Description	Uploaded Document Name Action	1
1 *	Copy of wholesale dealer licence, antibiotics permit, wholesale dealer licence to supply DD, whenever applicable	Uploa	ıd
2	Others	Uploa	ıd
* Ma	ndatory ^ Need original copy		
		Submit	ncel

- 6. Fill-in Proposed User ID and
- 7. Fill-in User Name e.g. Mr. CHAN Tai Man and
- 8. Fill-in Tel. No. (telephone number) or
- 9. (Optional) Fill-in Fax No. and
- 10. Fill-in Email and
- 11. Select Primary account (with option Y/N) and

	L Holder O Investigator						
Ð	Name of Organization (English):*]	Ð	Proposed User ID:*			
Ð	Name of Organization (Chinese):		Ð	Name:*			
			Ð	Tel. No.:*			
Ð	Business Registration Certificate Number:*		Ð	Fax:	6-11		
			Ð	Email:*			
Ð	Office Address:*				(* Email must be sam Hongkong Post e-Cert	e as the 's email a	ddress)
			Ð	Primary account:	Yv		,
Supp	porting Document(s)						
lo.	Document Description	Uplo	aded [ocument Na	me		Action
*	Copy of wholesale dealer licence, antibiotics permit, wholesale dealer licence to supply whenever applicable	DD,					Upload
	Others						Upload

12. Upload Supporting Document(s)

Supp	orting Document(s)	12		
No.	Document Description		Uploaded Document Name	Action
1 *	Copy of wholesale dealer licence, whenever applicable	e, antibiotics permi	, wholesale dealer licence to supply DD,	Upload
2	Others			Upload
* Mar	datory ^ Need original cop	ру		

Remarks:

- **1.** Each file must be under 3MB in size to upload.
- 2. The file type of the supporting document is restricted to PDF (Searchable PDF format), .doc, and .docx only.

13. Click "Submit" button to submit the account registration application

Account Registration Application

Name	of Organization (English):*	Test Organization		Ð	Proposed User ID:*	test_user	
Name	of Organization (Chinese):			Ð	User Name:*	Test User	
 Busine 	ess Registration Certificate Number:*	Test 123456		Ð	Tel. No.:* Fax:	22223333	
Office	Address: **	Test Address		Ð	Email:*	test_user@abc.com (* Email must be same a Hongkong Post e-Cert's e	s the mail address)
				Ð	Primary account:	Y •	
upportin	g Document(s)						
Doc	ument Description		Uploa	ded D	ocument Na	me	Action
Copy whe	y of wholesale dealer licence, antibiotics p never applicable	permit, wholesale dealer licence to supply DD,	<u>Testing</u>	<u>a Doci</u>	<u>ıments.pdf</u>		Delete
Othe	ers						Upload

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For Investigator Account (Personal Applicants), please see details below:

1. Select "Investigator" Option

Accou	nt Registration Application						
1 0 w	DL Holder 🖲 Investigator						
Ð	User Name:" Profession:" Profession Registration No.:" Office Address:"	(" The User Name must be same as the profess registration certificate / proof of professional qualification) Registered medical practitioners	ional	D D D	Proposed User ID:" Tel. No.:" Fax: Email:" Primary account:	(" Email must be same as the Hongkong Post e-Cert's email a]]] ddress)
Sup	porting Document(s)						
No.	Document Description		Uploade	d Doc	ument Name		Action
1 *	Copy of professional registration certificate / p	proof of professional qualification					Upload
2 *	Evidence supporting the staff's employment b	y the institution					Upload
3	Others						Upload
* M	andatory ^ Need original copy					Submi	t Cancel

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- 2. Fill-in User Name e.g. Dr. CHAN Tai Man and
- 3. Select Profession and
- 4. Fill-in Profession Registration No. and
- 5. Fill-in Office Address and

Account Registration Application

	User Name: "	(* The User Name must be same as the p registration certificate / proof of professio qualification)	professional nal	Propos User II Tel. No	D:*		
Ð	Profession:*	Registered medical practitioners	~	Email:	*]	
Ð	Profession Registration No.:* Office Address:*			Primar	(* Email mus Hongkong Po	t be same as the st e-Cert's email ac	idress)
Sup	porting Document(s)						
lo.	Document Description		Uploaded D	ocument I	Name		Action
lo. *	Document Description Copy of professional registration certificate /	/ proof of professional qualification	Uploaded D	ocument I	Name		Action Upload
lo. *	Document Description Copy of professional registration certificate , Evidence supporting the staff's employment	/ proof of professional qualification by the institution	Uploaded D	ocument I	Name		Action Upload Upload
*	Document Description Copy of professional registration certificate , Evidence supporting the staff's employment Others	[/] proof of professional qualification by the institution	Uploaded D	ocument I	Name		Action Upload Upload

- 6. Fill-in Proposed User ID and
- 7. Fill-in Tel. No. (telephone number) and/or
- 8. (Optional) Fill-in Fax No. and/or
- 9. Fill-in Email and
- 10. Select Primary account (with option Y/N) e.g. 'Y' for personal account user and

•	User Name: "	(* The User Name must be same as the profess registration certificate / proof of professional qualification)	ional	 Propo User Tel. N Fax: 	vo.:*	
	Profession:* Profession Registration No.:* Office Address:*	Registered medical practitioners		₽ Emai	ll:* 6- (* Email mu: Hongkong Po	t be same as the same same same same same same same sam
				Prima accou	ary Y 🗸 unt:	
pp	forting Document(s)		Unloadod	Document		Action
	Document Description		opioadeu	Document	t Name	
	Document Description Copy of professional registration certifica	te / proof of professional qualification	opioaded	Document	t Name	Uploa
-	Document Description Copy of professional registration certifica Evidence supporting the staff's employm	ate / proof of professional qualification ent by the institution	opioadeu	Document	t Name	Uploa

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11. Upload Supporting Document(s)

Suppo	orting Document(s)		
No.	Document Description	Uploaded Document Name	Action
1 *	Copy of professional registration certificate Landof of professional qualification		Upload
2 *	Evidence supporting the staff's employment by the institution		Upload
3	Others		Upload
* Mano	datory ^ Need original copy		

Remarks:

- 1. Each file must be under 3MB in size to upload.
- 2. The file type of the supporting document is restricted to PDF (Searchable PDF format), .doc, and .docx only.

12. Click "Submit" button to submit the account registration application

Account Registration Application

Ð	User Name:*	Dr. Test Test		Ð	Proposed	test_test	
Ð	Profession:** Profession Registration No.:*	(" The User Name must be same as th registration certificate / proof of profes qualification) Registered medical practitioners Test12345	e professional isional	D D D	Tel. No.:* Fax: Email:*	22223333 [test_test@abc.com] (* Email must be same as the Useplexe Dest o Certile amail	
>	Office Address:*	Test Address		Ð	Primary account:		address)
up	oorting Document(s)						
lo.	Document Description		Uploade	ed Doo	cument Name	2	Actio
*	Copy of professional registration certified	cate / proof of professional qualification	<u>Testing l</u>	Docum	ents.pdf		Dele
•	Evidence supporting the staff's employed	ment by the institution	<u>Testing l</u>	Docum	ents.pdf		Dele
	Othora						Uplo

Form will be validated if "Submit" button is clicked, possible warning messages are shown below:

Validation	Warning Messages
Missing user ID	Please input user ID
User ID is already in use	User id is already in use
Violate user ID policy	Violate user id policy
	User id should only contains
	1. Character (A-Z, a-z)
	2. Digit (0-9)
	3. Non-alphanumeric character
	(!@#\$%^&*()+={}[] <>?~:;,.)
	4. No space
User ID length is less than 5	Minimum user id length is 5
Missing user name	Please input user name
If user ID and password	User ID/ password incorrect
incorrect	
Missing email	Please input email
Email is already in use	Email is already in use
Email is not valid	Please input valid email address

If the validation is passed, successfully message will be shown.

Application submitted. Reference No. : AR00000385

3. Upon successful application. Activation email will be sent to the new user's email account. An email sample is shown below:

Dear Sir/Madam,
Your request for account creation is received. The requested account has been created at 30-Jun-2022 11:11:11.
Please click below link to activate the account within 24 hours
User ID: TestUser
Activation link:
https://www.drugoffice.gov.hk/TestTest&user_id=TestUser
Regards,
e-CTS

- 4. New user shall click the activation link within 24 hours.
- 5. Page will be redirected to the activation page.
- 6. Input Password
- 7. Input Confirm password
- 8. Click "Activate" button

Please assign a password to complete activation

User ID:	TestUser
Password:	
Confirm password:	5-6
7	Activate

9. Login page will be shown if passed the validation.

Account activated, please login.					
● Password Login ○ E-cert Login					
User ID:					
Password:					
Login					

ii. Reactivate User Account

- 1. Follow the step 1 of Section "Create User Account"
- 2. Reactivation email will send to the user's email account. An email sample is shown below:

Dear Sir/Madam,				
Your account is reset at 30-Jun-2022 11:11:11.				
Please click below link to re-active the account within 24 hours.				
User ID: TestUser				
Activation link:				
https://www.drugoffice.gov.hk/TestTest&user_id=TestUser_				
Regards,				
e-CTS				

- 3. Click the activation link within 24 hours.
- 4. Follow the steps 4 7 of <u>Section "Create User Account"</u> to assign a new password.

If passed the validation, "Password changed successfully" will be shown.

Password changed successfully

II. Account Management

i. Login and Dashboard

- Enter e-CTS via Drug Office website (www.drugoffice.gov.hk) →
 Pharmaceutical Trade → Login e-CTS
- 2. Drug Office website will open a new window popup for e-CTS Login page.
- 3. Select "e-Cert Login"
- 4. Select the e-Cert from file system
- 5. Input password and passphrase (e-Cert)
- 6. Click "Login" button, page will be redirected to "Dash Board" page

Drug Office Department of Health The Government of the Hong Kong Special Administrative Region	REINE
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Electronic Clinical Trial System (e-CTS)	
○ Password Login ● e-Cert Login User ID:	
Points to note:	
 Install and configure the required software: Web browser: Google Chrome, Microsoft Edge, Mozilla Firefox Web browser settings: <u>Signing Client</u> 	
 The private key and the PIN of your e-Cert will not be transmitted during the transaction. 	
 You should be alert to your surroundings before entering any personal information. Make sure that no one can see your personal particulars and e-Cert password. You should disable options on your browser to avoid storing or retaining your e-Cert password on the personal computer. 	
 Each intended user(s) in supervisor role for CTC requires applying the organizational/personal e-cert individually, please refer to the following link to HongKong Post (<u>How to Apply/Renew e-Cert)</u> To be completed in block letters or traditional Chinese. 	

Dash Board is a summary of status. Users are allowed to click on the result to navigate the details.

Dash Board								
Application Type			Applica	int		DHDO		
	Draft	Completed Draft	DH replied	Follow up (DH replied)	Pending Payment	Pending	Approved (Last 3 months records)	
New Application	0	<u>0</u>	<u>0</u>	0	1	2	2	
Amendment	Z	<u>0</u>	<u>0</u>	Q	1	3	<u>0</u>	

Result Status

Status name	Status description
Draft	Applications are open for edit and delete.
Completed Draft	Applications are completed by normal users / supervisors and are ready to submit.
DH replied	Applications are replied by DHDO, user need to follow DHDO officer's instruction before re-submit them.
Follow up (DH replied)	Follow up application are replied by DHDO.
Pending Payment	Applications are pending for payment by applicant.
Pending	Applications are under screening or evaluation in DHDO.
Approved	Applications are approved by DHDO.

View Company Profile ii.

In order to view company profile, users can select "Profile" \rightarrow "Company Profile Maintenance".

Compnay Profile information will be displayed

ľ	Drug Office Department of Health The Government of the Hong	g Kong Special Administrative Region	
Das	h Board CTC	Profile	中 Logout
8	Company Profile Main	tenance	Logon as: TEST HONG KONG LTI (Doctor Two) Date: 22.06.2022 12:11:23
Ð	BR number:	P000005-000	
Ð	Company (Eng) :	TEST HONG KONG LTD	
Ð	Company (Chi) :		
Co	ntact Information		
Ð	Contact Persons name:	Doctor Two	
Ð	Tel. No.:	21301200	
Ð	Email address:	ctc.system.user9@gmail.com	
Ð	Fax:		
Ð	Address (Eng):	SHOP 2, G/F, QUEEN ST, SHEUNG WAN	
			User manual Terms and Conditions Version 1.0.20220630_AT4 (C001001)

iii. User Profile Maintenance

In order to maintain user profile, users can select "Profile" \rightarrow "User Profile Maintenance".

1. Users will be displayed in "List of user"

Drug Office Department of Health The Government of the Hong Kong Special Administrative Region						
Dash Board CTC Profile	中 Logout					
🔇 User Profile Maintenance	Logon as: TEST HONG KONG LTD (Doctor Two) Date: 22.06.2022 12:11:23					
List of user:	User details:					
 Page 1 / 1 >> doctor2 = normaluser Indicate the primary user 	TEST HONG KONG LTD User ID: User ame: Email address": Email address": Role: Status: Last update: (dd.mm.yyyy HH:mm:ss) "Email entered must be same as the one registered in Hongkong Post e-Cert if you choose "Supervisor" Submit					

iv. Create User Account

- 1. Please see details below to create new user account:
 - Go to"Profile"→"User Profile Maintenance"→"User details"
 - 1. Input "User ID" and
 - 2. Input "User name" e.g. CHAN Tai Man and
 - 3. Input "Email address" and
 - 4. Select "Role" and
 - 5. Select "Status" and
 - 6. Click "Submit" button

Department of Health The Government of the Hong Kong Special Administrative Region						
Dash Board CTC Profile		中 Logout				
🔇 User Profile Maintenance	User Profile Maintenance					
List of user:	User details:					
 e Page 1 / 1 e e b doctor2 = b normaluser a Indicate the primary user 	TEST HONG KONG LTD Image: Status: Sta	u choose "Supervisor"				

*Email entered must be same as the one registered in Hong Kong Post e-Cert if you choose "Supervisor" Form will be validated if "Submit" button is clicked, possible warning messages are shown below:

Validation	Warning Messages
Missing user ID	Please input user ID
User ID is already in use	User id is already in use
Violate user ID policy	Violate user id policy
	User id should only contains
	1. Character (A-Z, a-z)
	2. Digit (0-9)
	3. Non-alphanumeric
	character(!@#\$%^&*()+={}[] <>?~:;,.)
	4. No space
User ID length is less than 5	Minimum user id length is 5
Missing user name	Please input user name
If user ID and password incorrect	User ID/ password incorrect
Missing email	Please input email
Email is already in use	Email is already in use
Email is not valid	Please input valid email address
Missing user role	Please select a user role
Missing user status	Please select a user status

If the validation is passed, "User created, activation email sent" will be shown.

User created, activation email sent

2. Activation email will send to the new user's email account. An email sample is shown below:

Dear Sir/Madam,
Your request for account creation is received. The requested account has been created at 30-Jun-2022 11:11:11.
Please click below link to activate the account within 24 hours
User ID: TestUser
Activation link:
https://www.drugoffice.gov.hk/TestTest&user_id=TestUser_
Regards,
e-CTS

- 3. New user shall click the activation link within 24 hours.
- 4. Page will be redirected to the activation page.
- 5. Input Password
- 6. Input Confirm password
- 7. Click "Activate" button

Please assign a password to complete activation	
User ID:	TestUser
Password: Confirm passwo	rd: 5-6
	7 Activate

8. Login page will be shown if passed the validation.

Accoun	t activated, please login.
	coward Login O E cart Login
⊕ Pa	
User ID:	
Password:	
	Login

v. Update User Info

Go to "Profile" \rightarrow "User Profile Maintenance".

- 1. Click on the target ID below the "List of user"
- 2. Change the "User name" e.g. CHAN Tai Man or
- 3. Change the "Email" (email for business use) or
- 4. Change the "Role" or
- 5. Click "Reset password/ reactivate" to reset password or reactivate the account or
- 6. Change the "Status"
- 7. Click "Update" button to submit change

st of user:	User details:	
🖲 📵 Page 🚺 / 🚺 🛞 🛞	ABC PHARMACEUTICAL CO. LTD).
TestUser	D User ID:	AngusTest
▶ newusr1234	D User name:	angus testing acc
	➡ Email address*:	shwong@e_mple.com
\cup	D Role:	Normal dar
	Reset password/ reactivate:	
	D Status:	Active 🗸
	Last update: (dd.mm.yyyy HH:mm:ss)	21.02.2022 14:52:47
	*Email entered must be same as th	e one registered in Hongkong Post e-Cert if you choose "Supervisor"
Indicate the primary user		Update Add new us

Form will be validated if "Update" button is clicked, below shows possible warning messages.

Validation	Warning Messages
Missing user name	Please input user name
Missing email	Please input email
Email is already in use	Email is already in use
Email is not valid	Please input valid email address
Missing user role	Please select a user role
Missing user status	Please select a user status

If the validation is passed, "User updated" will be shown.



- vi. Reset User Password / Reactivate
 - A. Go to "Profile" \rightarrow "User Profile Maintenance".
 - 1. Click on the target ID below the "List of user"
 - 2. Put a tick in the "Reset password/ reactivate" box to reset password or reactivate the account and
 - 3. Click "Update" button to submit change

🔇 User Profile Maintenance		Logon as: ABC PHARMACEUTICAL CO. LTD. (Trader Supervisor - User Two) Date: 19.06.20220 5:36:13
List of user:	User details:	
 e Page 1 / 1 (b) (b) restUser - newusr1234 	ABC PHARMACEUTICAL CO. LTD. ID User ID: ID User name: ID User name: ID Email address**: ID Role: Normal user ID Reset password/ reactivate: ID Status:	2
	Last update: (dd.mm.yyyy HH:mm:ss) 21.02.2022.14:52.41 The additional states are as the one registered in H	7 Hongkong Post e-Cert if you choose Supervisor" Update Add new user
- Indicate the primary USEr		· ·

The successful message will be shown. The reactivation mail will be sent.



B. User is required to change the password if password expired.

Password expired, please change the password now.	
User ID:	< <login id="" user="">></login>
Current password:	
New password:	
Confirm New password:	
Cha	ange password

Remarks: e-CTS has a fine grain password policy implemented and require password change every 90 days.

Login page will be redirected for user to login again if password expired. User is required to use the new password to login.

Password ch	hanged successfully, please login again.
● Pa	ssword Login 〇e-Cert Login
User ID:	
Password:	
	Login
	Apply user account