An Interpretation of the Opinions of the National Health and Family Planning Commission Regarding the Promotion of the Medical Institution Telemedicine Services

The National Health and Family Planning Commission of the People’s Republic of China

August 29, 2014

*Translation for informational purposes only. Bracketed English text constitutes editor additions for clarity.*
Telemedicine in China

Foley’s Health Care Industry Team and China Group help U.S.-based and China-based clients contrast telemedicine arrangements in China, enabling them to provide innovative care for patients around the block and around the world.

Technological advances are driving increased demand for telemedicine services in China, particularly in fields that support China’s underserved “primary and secondary” hospital facilities in rural areas, such as radiology, pathology, and expert consults. China’s healthcare sector continues to grow at an exponential rate, and there is a recent government push for telemedicine, which has been identified as essential to China’s healthcare delivery systems. On August 29, 2014, China’s National Health and Family Planning Commission published guidance and a series of opinions regarding the provision of telemedicine services in China. This guidance marks a new step toward the implementation and regulation of telemedicine in China, and we have provided a translation of the guidance in this document.

With internationally recognized IP capabilities and extensive hands-on experience in the Chinese business market, Foley is well positioned to provide legal insight to U.S., Asian, and European companies looking to do business in China. Navigating China’s often-ambiguous regulatory and governmental systems can be overwhelming. After years spent collaborating with counsel in key Chinese regions, we have developed deep-rooted contacts in local and central government offices to help guide our clients.

Global telemedicine services create global possibilities, and we work with clients to develop strategies and establish operations to seize those opportunities.

Tad Ferris  
Partner  
Washington, D.C. and China  
202.295.4090  
 tferris@foley.com

Nate Lacktman  
Partner  
Tampa  
813.225.4127  
 nlacktman@foley.com
An Interpretation of the Opinions of the National Health and Family Planning Commission Regarding the Promotion of the Medical Institution Telemedicine Services

中华人民共和国国家卫生和计划生育委员会 2014-08-29
The National Health and Family Planning Commission of the People’s Republic of China
August 29, 2014
一、起草背景
I. Background of the draft

依托信息化技术开展远程医疗服务，是提高基层医疗服务水平，解决基层和边远地区人民群众看病就医问题的有效途径之一。中共中央、国务院《关于深化医药卫生体制改革的意见》、《卫生事业发展“十二五”规划》和《国务院关于促进信息消费 扩大内需的若干意见》等文件都对此提出了明确要求。

Performance of telemedicine services by relying on information technologies is one of the effective ways to improve the level of medical services at the grassroots level and resolve the problem of medical care for members of the public at the grassroots level and in remote areas. Documents including Opinions Regarding the Deepening of the Reforms of the Medical and Health System, The 12th Five-Year Plan for the Development of the Health Cause and Several Opinions of the State Council Regarding the Consumption of Information and Expansion of the Domestic Demand have all set forth clear requirements in this regard.

2010年以来，中央财政投入8428万元，支持22个中西部省份和新疆生产建设兵团建立了基层远程医疗系统，并安排12所原卫生部部属（管）医院与12个西部省份建立高端远程会诊系统，共纳入12所原部属（管）医院、98所三级医院、3所二级医院和726所县级医院，有力推动了远程医疗的发展。根据我委2013年的统计，全国开展远程医疗服务的医疗机构共计2,057所。

Since 2010, the financial authorities of the central government have invested ¥84.28 million Yuan, in supporting 22 Midwestern provinces and Xinjiang Production and Construction Corp. in setting up telemedicine systems and in making arrangements for 12 hospitals originally subject to the jurisdiction (control) of the Ministry of Health to set up high-end remote diagnosis systems with 12 Midwestern provinces. A total of 12 hospitals originally subject to the jurisdiction (control) of the Ministry of Health, 98 hospitals at level 3, 3 hospitals at level 2 and 726 county level hospitals have been included, thus giving a vigorous promotion to the development of telemedicine services. Nationwide, the total number of medical institutions performing telemedicine services is 2,057.

随着远程医疗服务的广泛应用，国家层面需要对远程医疗的管理规范、实施程序、责任认定、监督管理等作出明确规定，以促进其健康发展。原卫生部1999年1月4日印发的《关于加强远程医疗会诊管理的通知》（卫办发〔1999〕2号），主要规范的是远程会诊管理。随着技术的进步，远程医疗服务的范围已经有了很大扩展，远程病理诊断、远程影像诊断、远程监护等新的远程医疗服务项目得到比较广泛的应用，原有的管理要求已经不能适当前远程医疗服务发展的实际要求。为推动远程医疗服务持续健康发展，优化医疗资源配置，实现优质医疗资源下沉，国家卫生计生委制定了《关于推进医疗机构远程医疗服务的意见》（以下简称《意见》）。

In order to utilize the telemedicine services more effectively at the State level, clear provisions are needed for management, regulations, implementing procedures, identifying responsibilities and supervision of telemedicine services to promote their healthy development. The Notice on Reinforcing the Administration of Telemedicine,
printed and issued on January 4, 1999 by the former Ministry of Health (Health Office Issue (1999) Number
2), mainly regulates the management of remote diagnosis. With more advanced technologies, the scope of
telemedicine services has been greatly expanded. New telemedicine service items, such as remote pathological
diagnosis, remote imaging diagnosis and remote monitoring, etc., have been used widely. The original
managerial requirements no longer meet the actual requirements of the current development in telemedicine
services. To promote the sustained healthy development of telemedicine services, optimize the allocation of
medical resources and achieve the goal of providing quality medical services resources to the grassroots level,
the National Health and Family Planning Commission has prepared the Opinions Regarding the Promotion of
Medical Institution Telemedicine Services (hereinafter referred to as “The Opinions.”)
二、主要内容
II. Major items

《意见》分为4个部分，其主要内容如下:

The Opinions are divided into 4 parts and its major items are as follows:

（一）积极推动远程医疗服务发展。
(I) Actively promote the development of telemedicine services.

地方各级卫生计生行政部门要将远程医疗服务体系建设纳入区域卫生规划和医疗机构设置规划，积极协调同级财政部门为远程医疗服务的发展提供相应的资金支持和经费保障，协调发展改革、物价、人力资源社会保障等相关部门，为远程医疗服务的发展营造适宜的政策环境。

Administrative authorities in charge of health and family planning at various local levels should include the construction of a telemedicine service system in their regional health plan and medical institution setup plan, actively coordinate with financial authorities at the same level in order to provide appropriate funding, support and safeguarding for the development of telemedicine services and coordinate with relevant authorities, including reforms, pricing, human resources and Social Security, etc. in order to create an appropriate policy environment for the development of telemedicine services.

（二）确保远程医疗服务质量安全。
(II) Ensure the quality and safety of telemedicine services.

一是明确了远程医疗服务的定义和内容:一方医疗机构邀请其他医疗机构，运用通讯、计算机及网络技术，为本医疗机构诊疗患者提供技术支持的医疗活动。其项目主要包括:远程病理诊断、远程医学影像诊断、远程监护、远程会诊、远程门诊、远程病例讨论等。

First, clarify the definition and content of telemedicine services: on one hand, medical institutions invite other medical institutions in using communications, computer and network technologies to provide medical activities in the diagnosis and treatment of patients of their own medical institutions with technical support. Their products mainly include: remote pathological diagnosis, diagnostic imaging monitoring, consultations, outpatient services and case discussions, etc.

二是要求医疗机构在开展远程医疗服务过程中严格遵守相关法律、法规、信息标准和技术规范，确保医疗质量安全，维护患者合法权益。非医疗机构不得开展远程医疗服务。

Second, during the performance of telemedicine services, medical institutions are required to strictly comply with the applicable laws, regulations, information standards and technical practices, ensuring the quality and safety of medical services and protecting the legal interest of patients. Non-medical institutions are not authorized to provide telemedicine services.
(三) 完善远程医疗服务流程。
(III) Perfect telemedicine service processes.
一是要求开展远程医疗服务的医疗机构具备相应的诊疗科目及人员、技术、设备、设施条件，签订远程医疗服务合作协议，约定远程医疗服务流程、权利义务、医疗损害风险和责任分担等事项，并取得患者知情同意。
First, medical institutions that perform telemedicine services are required to have appropriate diagnostic and treatment departments, personnel, technologies, equipment facilities, execute telemedicine cooperation agreements and covenant items, including telemedicine service processes, rights and obligations and the sharing of medical harm risks and responsibilities, etc., and obtain the informed consent of patients.
二是要求开展远程医疗服务的医疗机构完善远程医疗服务流程，并认真做好组织实施。医疗机构要按照病历书写及保管有关规定共同完成病历资料。
Second, medical institutions that undertake telemedicine services are required to perfect their telemedicine service processes and conscientiously organize their implementation. Medical institutions should jointly complete medical records information in accordance with the relevant provisions for the writing and safekeeping of medical records.

(四) 加强远程医疗服务监督管理。
(IV) Enhance the supervision and management of telemedicine services.
一是要规范机构名称。未经国家卫生计生委核准，任何开展远程医疗服务的医疗机构，不得冠以“中国”、“中华”、“全国”及其他指代、暗含全国或者跨省(自治区、直辖市)含义的名称。
First, standardize names of the institutions. Without the approval of the National Health and Family Planning Commission, no medical institution performing telemedicine services shall include in their names “China,” “Chinese” and “National” and other alternative names or names that imply a nationwide or interprovincial (inter-autonomous regions and cities subject to the direct jurisdiction of the central government) scope.
二是要控制安全风险。医疗机构在开展远程医疗服务过程中，主要专业技术人员或者关键设备、设施及其他辅助条件发生变化，不能满足远程医疗服务需要，或者存在医疗质量和医疗安全隐患，以及出现与远程医疗服务直接相关严重不良后果时，须立即停止远程医疗服务并按规定报告。
Second, safety control risks. During the performance of telemedicine services by medical institutions, any change of key professional and technical personnel or key equipment, facilities and other supporting conditions, which makes it impossible to meet the need for the telemedicine services or if there exists any hazards with the quality of medical services and medical safety and upon the occurrence of serious adverse consequences directly related to telemedicine services, telemedicine services should be stopped immediately and a report shall be filed in accordance with the applicable provisions.
三是要加强日常监管。地方各级卫生计生行政部门在监督检查过程中发现存在远程医疗服务相关的医疗质量安全隐患或者接到相关报告时，要及时组织对医疗机构远程医疗服务条件的论证，经论证不具备远程医疗服务条件的，要提出整改措施，在整改措施落实前不得继续开展远程医疗服务。

FOR MORE INFORMATION, VISIT US ONLINE AT FOLEY.COM
Third, enhance daily supervision. When administrative authorities at various local levels in charge of health and family planning discover hazards that exist with the quality and safety of medical services related to telemedicine services, they should immediately conduct an investigation, and verification of any issues with proof. Upon such an investigation, if the conditions are not adequately improved to provide telemedicine services, corrective actions should be proposed and prior to the execution of such corrective actions, and telemedicine service is not permitted to continue.

Fourth, handle the matter in accordance with laws and regulations. Upon the occurrence of any medical dispute during the performance of telemedicine services, the host and the invited party shall handle the matter in accordance with the applicable laws and regulations and the agreement reached by and between the parties and undertake the appropriate responsibilities. When medical personnel directly provide telemedicine services to patients, their medical institutions should undertake the appropriate responsibility in accordance with the provisions of applicable laws and regulations. In the event that medical institutions and medical personnel engage in actions that violate laws and regulations during the process of the performance of telemedicine services, the administrative authorities in charge of health and family planning should deal with the same in accordance with the provisions of applicable laws and regulations.

In addition, when information technology is used among medical institutions, whereby one medical institution uses the relevant equipment to precisely control the instruments and equipment (such as a surgical robot) of another medical institution to directly perform medical activities, such as an examination, diagnosis, treatment, real-time operational surgery and monitoring, the management measures and relevant standards and regulations therefore will be separately prepared by our Commission. When telemedicine services are performed between [Chinese] medical institutions and medical institutions outside of our country, reference should be made to The Opinions.

Relevant link[/Attachment]: Opinions of the National Health and Family Commission Regarding the Promotion of Medical Institution Telemedicine Services

[SEE NEXT PAGE FOR ATTACHMENT TRANSLATION.]
To promote the sustained and healthy development of telemedicine services, optimize the allocation of medical resources, achieve the goal of providing quality medical services resources to the grassroots level, improve the capability and level of medical services and further implement and execute the *Opinions of the Central Committee of the Chinese Communist Party and the State Council regarding the Deepening of the Reforms of the Medical and Health Systems*, the following Opinions are hereby proposed in the initiative for the improvement of telemedicine services by medical institutions:
一、加强统筹协调，积极推动远程医疗服务发展

I. Enhance overall coordination and actively promote the development of telemedicine services

地方各级卫生计生行政部门要将发展远程医疗服务作为优化医疗资源配置、实现优质医疗资源下沉、建立分级诊疗制度和解决群众看病就医问题的重要手段积极推进。将远程医疗服务体系建设纳入区域卫生规划和医疗机构设置规划，积极协调同级财政部门为远程医疗服务的发展提供相应的资金支持和经费保障，协调发展改革、物价、人力资源社会保障等相关部门，为远程医疗服务的发展营造适宜的政策环境。鼓励各地探索建立基于区域人口健康信息平台的远程医疗服务平台。

Administrative authorities at various local levels in charge of health and family planning should actively promote the improvement of the quality of telemedicine services as an important means of optimizing the allocation of medical resources, achieve the goal of providing quality medical services resources to the grassroots level, setting up diagnostic and treatment systems at various levels and resolving the issue of medical diagnosis and treatment for members of the public. [Such authorities should also] include construction of a telemedicine service system in their regional health plan and medical institution setup plan, actively coordinate with financial authorities at the same level in order to provide appropriate funding and support and safeguards for the development of telemedicine services and coordinate with [other] relevant authorities, including reforms, pricing, human resources and Social Security, etc., in order to create an appropriate policy environment for the development of telemedicine services. [In addition, they should] encourage various locales to explore the setup of platforms for provision of telemedicine services based on the health information platform of the regional populations.
二、明确服务内容，确保远程医疗服务质量安全
II. Clarify service items and ensure the quality and safety of telemedicine services

（一）远程医疗服务内容。远程医疗服务是一方医疗机构（以下简称邀请方）邀请其他医疗机构（以下简称受邀方），运用通讯、计算机及网络技术（以下简称信息化技术），为本医疗机构诊疗患者提供技术支持的医疗活动。医疗机构运用信息化技术，向医疗机构外的患者直接提供的诊疗服务，属于远程医疗服务。远程医疗服务项目包括：远程病理诊断、远程医学影像（含影像、超声、核医学、心电图、肌电图、脑电图等）诊断、远程监护、远程会诊、远程门诊、远程病例讨论及省级以上卫生计生行政部门规定的其他项目。

(I) Telemedicine service items. Telemedicine services are medical activities whereby the medical institutions of one party (hereinafter referred to as the host) invite other medical institutions (hereinafter referred to as the invited parties) to use communications, computer and network technologies (hereinafter referred to as information technologies) to provide technical support in the diagnosis and treatment of patients in their own institutions. Diagnostic and treatment services provided by medical institutions using information technologies directly to patients outside their own medical institutions are telemedicine services. Telemedicine service items include: remote pathological diagnosis, remote medical imaging (including imaging, ultrasound, nuclear medicine, electrocardiograms, electromyography and electroencephalograms, etc.) diagnosis, remote monitoring, remote consolidations, remote outpatient services and remote case discussions and other items provided by administrative authorities above the provincial levels in charge of health and family planning.

（二）遵守相关管理规范。医疗机构在开展远程医疗服务过程中应当严格遵守相关法律、法规、信息标准和技术规范，建立健全远程医疗服务相关的管理制度，完善医疗质量与医疗安全保障措施，确保医疗质量安全，保护患者隐私，维护患者合法权益。非医疗机构不得开展远程医疗服务。

(II) Comply with the relevant management regulations. During the process of the performance of telemedicine services, medical institutions should strictly comply with the applicable laws, regulations, information standards and technical practices, [have in place] a complete professional management system related to telemedicine services, perfect medical service quality and medical safety safeguards, ensure the quality and safety of medical services and protect the privacy of patients and the legitimate interest of patients. Non-medical institutions are not permitted to perform telemedicine services.
III. Perfect the service process and ensure the high quality and efficiency of telemedicine services

(I) Possess the basic conditions. Medical institutions have the diagnostic and treatment subjects befitting the performance of telemedicine services and corresponding personnel, technologies, equipment and facilities and conditions, can perform telemedicine services and designate dedicated departments or personnel that are responsible for the regular tests, registrations, maintenance, modifications and upgrades of the instruments, equipment, facilities and information systems used in telemedicine services, to ensure that telemedicine service systems (hardware and software) are in standard operation, meet the relevant health information standards and information security provisions related to telemedicine services and meet the needs for medical institutions in performing their telemedicine services.

(II) Execute a cooperation agreement. When medical institutions perform telemedicine services among themselves, they should execute a cooperation agreement on telemedicine services and covenant items such as the purpose of a cooperation, conditions of cooperation, processes of telemedicine services, the rights and obligations of the parties and the sharing of the risks of medical harm and responsibilities.

(III) Informed consent of patients. The host should fully inform patients and seek their written consent. When it is not appropriate to offer an explanation to the patient [e.g., in minor patient situations], the written consent of the guardian or a close relative of patients should be sought.

(IV) Conscientiously organize implementation. When the host needs to engage in a discussion of individual cases in the performance of telemedicine services, it needs to submit an invitation to the invited party. The invitation should at least include the cause of action, purpose of the invitation, the schedule, excerpts of the
relevant medical records of the patient and the professional and technical positions and competency qualifications of the physicians proposed for the invitation. After receiving an invitation for telemedicine services, the invited party should promptly make a decision as to whether to accept such an invitation. If it accepts such an invitation, it must notify the host and properly perform the relevant preparatory work; if it does not accept the invitation, it should promptly notify the host and explain the reasons.

受邀方应当认真负责地安排具备相应资质和技术能力的医务人员，按照相关法律、法规和诊疗规范的要求，提供远程医疗服务，及时将诊疗意见告知邀请方，并出具由相关医师签名的诊疗意见报告。邀请方具有患者医学处置权，根据患者临床资料，参考受邀方的诊疗意见作出诊断与治疗决定。

The invited party should conscientiously and responsibly arrange for medical personnel with appropriate qualifications and technical abilities to provide telemedicine services in accordance with the requirements of applicable laws, regulations and diagnostic practices, promptly inform the host of the diagnostic opinions and issue diagnostic opinions and reports signed by the relevant physicians. The host has the right of medical disposal with respect to the patients and should, based on the clinical information on the patients and with reference to the diagnostic opinions of the invited party, make diagnostic and treatment decisions.

（五）妥善保存资料。邀请方和受邀方要按照病历书写及保管有关规定共同完成病历资料，原件由邀请方和受邀方分别归档保存。远程医疗服务相关文书可通过传真、扫描文件及电子签名的电子文件等方式发送。

(V) Properly maintain records. The host and the invited party should jointly complete medical record information in accordance with the provisions related to the writing and safekeeping of medical records. The original copies should be separately filed by the host and invited party respectively. Documents related to telemedicine services can be sent by fax, scanned and electronically signed for electronic filing.

（六）简化服务流程。邀请方和受邀方建立对口支援或者其他合作关系，由邀请方实施辅助检查，受邀方出具相应辅助检查报告的，远程医疗服务流程由邀请方和受邀方在远程医疗合作协议中约定。

(VI) Simplify the service process. The host and the invited party should set up matching support or another kind of partnership relationship. Where the host implements auxiliary examinations and the invited party issues corresponding auxiliary examination reports, the telemedicine service process should be covenanted by and between the host and invited party in the telemedicine cooperation agreement.

（七）规范人员管理。医务人员向本医疗机构外的患者直接提供远程医疗服务的，应当经其执业注册的医疗机构同意，并使用医疗机构统一建立的信息平台为患者提供诊疗服务。

(VII) Standardize personnel management. In the event that medical personnel provide telemedicine services directly to patients outside their own medical institutions, the consent of the medical institutions where they are registered to practice should be obtained and the information platform centrally set up by the medical institutions should be used to provide diagnostic and treatment services for patients.
四、加强监督管理，保证医患双方合法权益
IV. Enhance supervision and management and guarantee the legitimate interests of both physicians and patients

(一) 标准化机构名称。各级地方卫生计生行政部门要加强对远程医疗服务的监督管理。未经我委核准，任何开展远程医疗服务的医疗机构，不得冠以“中国”、“中华”、“全国”及其他指代、暗含全国或者跨省（自治区、直辖市）含义的名称。

(I) Standardize names of the institutions. Administrative authorities in charge of family planning should enhance supervision and management of telemedicine services. Without the approval of our Commission, no medical institution performing telemedicine services should include in their name “China,” “Chinese” and “National” and other alternative names or names that imply a nationwide or interprovincial (inter-autonomous regions and cities subject to the direct jurisdiction of the central government) scope.

(二) 控制安全风险。医疗机构在开展远程医疗服务过程中，主要专业技术人员或者关键设备、设施及其他辅助条件发生变化，不能满足远程医疗服务需要，或者存在医疗质量和医疗安全隐患，以及出现与远程医疗服务直接相关严重不良后果时，须立即停止远程医疗服务，并按照《医疗质量安全事件报告暂行规定》的要求，向核发其《医疗机构执业许可证》的卫生计生行政部门报告。

(II) Control safety risks. During the process of the performance of telemedicine services by medical institutions, in case of any change to key professional and technical personnel or key equipment, facilities and other supporting conditions, which makes it impossible to meet the need for telemedicine services or if there exists any hazards with the quality of medical services and medical safety and upon the occurrence of serious adverse consequences directly related to the telemedicine services, telemedicine services should be stopped immediately and a report should be filed with the administrative authorities in charge of health and family planning that have issued License of a Medical Institution for Practice thereto in accordance with the requirements of Interim Provisions for Reporting Medical Service Quality and Safety Incidents.

(三) 加强日常监管。地方各级卫生计生行政部门在监督检查过程中发现存在远程医疗服务相关的医疗质量安全隐患或者接到相关报告时，要及时组织对医疗机构远程医疗服务条件的论证，经论证不具备远程医疗服务条件的，要提出整改措施，在整改措施落实前不得继续开展远程医疗服务。

(III) Enhance daily supervision. When administrative authorities at various local levels in charge of health and family planning discover hazards that exist with the quality of medical services related to telemedicine services, they should immediately organize an investigation and verification with proof by medical institutions. Upon such an investigation, if the conditions are not adequately improved to provide telemedicine services, corrective actions should be proposed and prior to the execution of such corrective actions, performance of telemedicine services should not continue.
（四）依法依规处理。在远程医疗服务过程中发生医疗争议时，由邀请方和受邀方按照相关法律、法规和双方达成的协议进行处理，并承担相应的责任。医务人员直接向患者提供远程医疗服务的，由其所在医疗机构按照相关法律、法规规定，承担相应责任。医疗机构和医务人员在开展远程医疗服务过程中，有违反《执业医师法》、《医疗机构管理条例》、《医疗事故处理条例》和《护士条例》等法律、法规行为的，由卫生计生行政部门按照有关法律、法规规定处理。

(IV) Handle the matter in accordance with laws and regulations. Upon the occurrence of any medical dispute during the performance of telemedicine services, the host and the invited parties should handle the matter in accordance with the applicable laws and regulations and the agreement concluded by and between the parties and undertake appropriate responsibilities. When medical personnel directly provide telemedicine services to patients, their medical institutions should undertake appropriate responsibility in accordance with the provisions of applicable laws and regulations. In the event that medical institutions and medical personnel engage in actions that violate laws and regulations, including the Law of Practicing Physicians, Management Regulations of Medical Institutions, Regulations for the Handling of Medical Accidents and Nurse Regulations, etc., during the process of the performance of telemedicine services, the administrative authorities in charge of health and family planning should deal with the same in accordance with the provisions of applicable laws and regulations.

医疗机构之间运用信息化技术，在一方医疗机构使用相关设备，精确控制另一方医疗机构的仪器设备（如手术机器人）直接为患者进行实时操作性的检查、诊断、治疗、手术、监护等医疗活动，其管理方法和相关标准规范由我委另行制定。医疗机构与境外医疗机构之间开展远程医疗服务的，参照本意见执行。执行过程中有关问题，请及时与我委医政医管局联系。

When information technology is used among medical institutions, whereby one medical institution uses the relevant equipment to precisely control the instruments and equipment (such as a surgical robot) of another medical institution to directly perform medical activities, such as examination, diagnosis, treatment, real-time operational surgery and monitoring, the management measures and relevant standards and regulations therefore will be separately prepared by our Commission. When telemedicine services are performed between medical institutions and medical institutions outside our country, reference should be made to The Opinions. For any issue during the implementation process, please contact Medical Administration and Medical Control Bureau of our Commission in a timely manner.

联 系 人：范晶、焦雅辉
Contact persons: Fan Jing and Jiao Yahui

联系电话：010–68792791、68791888
Contact phone numbers: 010 - 68792791, 68791888

国家卫生计生委
National Health and Family Planning Commission

2014年8月21日
August 21, 2014