

TERMS & INFORMATION ABOUT FEES FOR PRIVATE PATIENTS

General

1. By attending for consultation or treatment, you agree to my terms and to pay any fees or charges for such consultation or treatment.
2. Following consultation or treatment I will send or give you an invoice for my professional fees. I require invoices to be settled within 30 days from the date of invoice.
3. Charges may be paid in cash, by cheque or by bank transfer or credit card.

Please note - the hospital receptionist may take your credit card details separately. Your card will only be charged for any services provided by the hospital (if applicable)
4. If you are insured and have supplied your insurance details, the invoice for your consultation or treatment will, in most cases, be sent directly to your insurance company on your behalf, unless you request otherwise.
5. Should I need to invoice you directly, for whatever reason, payment will be required within 30 days, irrespective of whether you have received reimbursement from your insurance company.
6. In all cases you will remain responsible for payment of my fees, including any excess or other amount which your insurance company declines to pay. You are strongly advised to confirm in advance, with your insurance company, that your consultation and any treatment required is covered and whether you have an excess on your policy. If you have pre-authorisation then my fees will be in accordance of your insurers agreed fees.
7. Failure to make payment within 30 days from date of invoice will be liable to late payment fees:

Payment later than 30 days from date of invoice - additional £25.00
Payment later than 60 days from date of invoice - additional £50.00
Payment later than 90 days from date of invoice - additional £100.00

Failure to settle your account within 120 days of date of invoice may lead to fees being pursued through legal routes - eg via a solicitor or small claims court. In such cases you will be liable for additional fees which will be applied to your account. These additional fees may include but are not limited to:

Solicitor fees:	As charged by solicitor.
Additional Time by Me:	£350 / hr
Application to Small Claims Court:	£180.00 if outstanding amount is less than £5000.00 At cost if amount is greater than £5000.00

Information on fees

8. Unless otherwise advised my consultation fees are:

Initial Consultation - 30 minute Appointment	£200.00
Initial Consultation - 60 Minute Appointment	£350.00
Follow-up Consultation	£120.00

9. Fees for special tests or minor procedures carried out in outpatient clinic:

These cannot always be anticipated. If they are necessary, you will be advised of the fees on the day and asked to sign your agreement. If you would like to know the charge for any particular procedure in advance please ask.

10. Fees for procedures carried out as Day Patient or Inpatient:

I will send you details of the procedure, the procedure coded description of the anticipated service(s) in advance, together with an estimate of my fees, and an agreement to sign.

My fees for procedures and surgery are generally aligned with benefits payable by most major UK insurance companies. However, this may not always be the case. Your insurance company may have a scale of charges which may differ. If there is any difference, you may be required to pay part or all of this. You are advised to confirm with your insurance company that you are covered for the proposed treatment(s).

11. Anaesthetists fees:

Anaesthetist's fees, if applicable, are charged independently. The name and contact details of your anaesthetist will be provided on request.

12. Missed Appointments:

A charge may be made for missed appointments.

A charge may be applied for appointments that are cancelled with less than 48 hours notice.

13. Other services:

A charge may be made for completion of claim forms, or for medical or other reports in addition to my normal clinic or post-operative letters.

Data Protection & Personal Information

14. Your medical records are held on paper files, and administrative records and letters are held on computer. The administrative records include personal information.

All reasonable steps are taken to keep your records secure, and, other than to medical personnel directly involved in your care or for administrative purposes, information about you will only be passed to third parties with your express consent.

15. If you provide an email address and your consent, I may use this to send you appointment details, letters and other information directly related to your care. The letters may include clinical information.



Before sending any documents or appointment details I will send a confirmatory email to the address supplied to ensure that it is your email.

16. If you have indicated that your treatment is covered by an insurance policy and your insurance company request to know your diagnosis, this will be provided unless you request otherwise. More detailed information will only be provided with your written consent.
17. Your personal information will be used for purposes linked with your care and for administrative purposes. Your information will not be passed on to other parties or used for other purposes without your express consent.
18. You may obtain a copy of the records that I hold about you on request. A fee may be charged.
19. You will be asked to confirm your personal details at each visit. Your most recent address / email address that you confirm / supply will be used for invoicing and communications.
20. If you change address / email address / telephone number / GP it is your responsibility to inform me of this change, in order to ensure that you continue to receive information.

Agreement to Terms

Name of Patient: _____

Patient's Date of Birth: _____

Name of Person Signing: _____

Relationship to patient: _____

Address: _____

By providing an email address below you agree to being contacted by email and that I may send you documents that may include clinical information.

Email Address: _____

BY SIGNING I AGREE TO THESE TERMS.

Signed: _____

Date: _____