



## **Please Read Carefully**

### **Terms & conditions of treatment**

1. I consent to Physiotherapy treatment, and understand that following each treatment payment is required and I am liable for the payment of such treatment. I agree to make payment by cash, debit or credit card.
2. Following my examination and assessment a treatment plan will be explained to me. To benefit fully from the treatment, continuity of the treatment is important. Therefore, I consent to treatment from another Physiotherapist, equally qualified, should my Physiotherapist be ill that day.
3. Fee Structure for self-paying patients:
  - a. Clinical specialist consultation 45min - £120
  - b. First consultation (assessment, treatment, prognosis and plan) 45min - £75
  - c. Subsequent treatments 30min - £60
  - d. Sports massage 30min - £60
  - e. Video Consultation 30min - £60
  - f. Home Visit 60min - £120
  - g. Shockwave Treatment 30min - £95
4. I am responsible for payment of all treatment received and any cancellation fee incurred. Interest of 2.5% will be charged for account more than one month overdue.
5. The fee for the initial consultation for Physiotherapy is payable even if the practitioner cannot help in particular condition.
6. I agree to give a minimum of 24hrs notice for cancellations for appointments payable if notice is not received on time. The fee will be charged regardless of reason i.e. traffic, work priorities, forgetfulness, delays on public transport, illness. The policy of the clinic is to send an invoice.
7. The time spent on my treatment is entirely at the practitioner's discretion and is based on my specific condition. I may find that treatment is of longer or shorter duration than the appointment time.
8. Only one condition at a time can be adequately dealt with on each appointment. If time allows another condition may be dealt with, otherwise I may need to attend separately for different problems.



9. I will endeavor to attend the clinic for my appointment on time. Half hour lists are kept and even 10min delay means that my valuable treatment time is wasted. In the event that I am late, I will be allocated only the time left of my treatment, as the next patient cannot be kept waiting. In the event that I am more than 20min late, I cannot be seen and this will be charged as a cancellation with the full fee payable.

10. I understand that my GP will be informed of my progress unless I request otherwise.

11. Insurance Companies do not pay DNA's or the late cancellation fees, therefore I understand that I will be responsible for payment.

12. Insurance clients are aware that they are responsible for keeping a track of their authorised sessions, and if any fees are incurred they are liable for payment.

13. Insurance clients are reminded they are liable to pay all excess and nonpayments within 30 days of receipt of any invoices.

14. I understand that from time to time W5Physio will send via email their Newsletter, and if I no longer wish to receive it I will unsubscribe. Please email us at [reception@w5physio.co.uk](mailto:reception@w5physio.co.uk) if you wish to Opt Out.

I have read, understood and agreed to the above.