

Fortrose Medical Practice

Partners: Dr. Iain Forth, Dr. Shona Forth, Dr. Suzy Walker & Dr. Ross Grant

Associate GP: Dr. Sally Martin & Dr Antonia Reed

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|--------------|----------|------------------------------------|
| Station Road | Phone: | 01381 622000 |
| Fortrose | Email: | High-UHB.GP55381-reception@nhs.net |
| Ross-shire | Website: | www.fortrosesurgery.co.uk |
| IV10 8SY | | |

Private Work Consultation and Fee Note

DATE: _____ **PATIENT (Name and address):** _____

Bill Payer (if not the patient – name and address): _____

| Item of Service | Cost | ✓ |
|--|----------------|---|
| Access to, or copies of, medical records (Refer to Access to records policy) | n/a | |
| Private GP consultation 15 mins (overseas visitors) incl. prescription if necessary | £65 | |
| Private GP Home Visit incl. prescription if necessary | £130 | |
| Private Prescription | £15 | |
| Private Nurse appointment 10 mins | £20 | |
| Private blood tests – charged as per lab charge plus £25 | Please enquire | |
| Medical Report for Insurance purposes | £130 | |
| Supplementary report for insurance purposes | £27 | |
| HGV medical | £110 | |
| Driving licence photo verification | £20 | |
| Firearms / shotgun certificates | £60 | |
| Letter requested by – or on behalf of – patient (up to 1 page) i.e. housing, benefit, travel | £20 | |
| Form requested by – or on behalf of – patient; i.e. holiday cancellation | £20 | |
| DNA swab testing for registered patients | £75 | |
| DNA swab testing for patients not registered with the practice | £85 | |
| Power of Attorney – Schedule 1 – single GP appointment | £50 | |
| Everything else not listed above, please enquire | | |
| Total Cost Payable | £ | |

Payment Due Upon Receipt 30 Calendar Days

Please make cheques payable to Fortrose Medical Practice.

Our bank details for BACS payment are as follows:

Account Name: Fortrose Medical Practice
Sort Code: 80-06-83
Account Number: 00965447
Remittance Advice: please email to gaby.ormerod@nhs.net