

FEES PAYABLE FOR NON-NHS SERVICES

Please make cheques payable to Elizabeth Courtauld Partnership, not to the Doctor.

Thank you

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ITEM	PAID BY	FEE
ACCESS TO MEDICAL RECORDS		
Medical Records Perusal (Under supervision)	Patient	£10.00
Medical Records - Copy of computerised	Patient	£10.00
records		
Medical Records - Copy of manual and/or	Patient	£50.00
manual and computer records		
ADODTION/ FOOTEDING		
ADOPTION/ FOSTERING		070.00
Adoption Medical Forms (NHS		£76.30
recommendation) (Fostering Form AH)		004.00
Adoption Medical Forms AH2		£24.36
ATTENDANCE ALLOWANCE		
GP Factual Report	DWP	£33.50
DS1500 Form	DWP	£17.70
201000101111		217.70
CERTIFICATES		
Private sick note	Patient	£17.50
Freedom from infection	Patient	£17.50
Private certificate – non NHS	Patient	£17.50
Shotgun Licence	Patient	£20.00
Fitness to travel/fly/exam etc	Patient	£20.00
Fitness to exercise	Patient	£20.00
Holiday cancellation	Patient	£25.50
WE NO LONGER SIGN PA	SSPORT PHOTOS	1
CHILDMINDER		
Ofsted Health Declaration Form	Patient/ Employer	£87.50
CONSULTATION		
Private Consultation Per Hour pro rata	Patient	£190.00
Private Consultation (10 minutes)	Patient	£32.00
CREMATION		
Cremation Fees (Form 4, Form 5)	Family	£82.00
Cremation rees (roint 4, roint 5)	ı anıny	202.00
ECG		
Private ECG and Report		£61.00
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FOREIGN VISITORS CHARGES		
GP Consultation only (10mins)	Patient	£32.00
Referral for other care	Patient	£35.00
Private Prescription		£16.00
HEP B		
Hep B course of 3	Employer	£120.00
Single immunisation of HepB not for travel	Patient	£39.50
Follow up blood test	Employer/ Patient	£39.50
MCA2 FORMS		
GP's do not complete these		
or 3 do not complete these		
MEDICALS - EMPLOYER		
Full medical & report (45 Mins)	Employer	£190.00
Letter – record extract (no exam)	Employer	£81.00
Letter - record extract (no exam)	Solicitors	£81.00
MEDICAL C. INCUIDANCE		
MEDICALS – INSURANCE		0400.00
GPR/ eGPR	Insurance Company	£106.00
Supplementary Information	Insurance Company	£29.70
Medical Questionnaire	Insurance Company/Patient	£30.25
	Company/Fatient	
MEDICALS - PRIVATE		
HGV/PSV Medical (45 mins)	Patient	£85.00
Taxi medical (20 mins)	Patient	£55.00
Pilots and racing licence	Patient	£81.00
Fitness to drive exam & report for elderly	Patient	£48.00
Slimming Medical	Patient	£25.00
DVLA Medical report	DVLA	£85.00
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PATERNITY TESTING		
Orchid Cellmark (Oxford) Tel 01235 528609		
Oxford Tel 01235 528609		
Three (3) sample mouth swab tests	Patient	£399.00
Sample kit sent to sampler		+VAT
(GP or appointed doctor)	0 1:14 00	000.00/
Sample taken by GP or chosen doctor	Orchid to pay GP	£30.00/
		sample
University Diagnostics Ltd (London)		
Tel 020 8943 8400		
Three sample kit (mouth swabs)		£381.00 +
, , ,		VAT =
		£447.68



Registration can be requested online, to be			
returned, acting as consent, with payment or			
legal aid certificate. Results in five working			
days of receipt of samples.			
Sample taken by GP or chosen doctor	UD to pay GP	£30.00/	
		sample	
POWER OF ATTORNEY			
Witnessing of Power of Attorney/wills	Patient	£17.50	
COP3 – GP's do not complete these			
Private Prescription		£16.00	
SMEAR TESTS			
Private smear tests (surgery fee)		£31.60	
Private smear tests (lab fee)		£47.34	
Patient to pay surgery as lab will invoice			
surgery direct.			
TRAVEL			
Single Immunisation for travel	Patient	£17.80	
Course of three immunisations for travel	Patient	£30.50	
Private Prescription For Travel	Patient	£16.00	
Diphtheria, polio and tetanus (combined		Free	
booster)			
Typhoid		Free	
Hepatitis A (including when combined with		Free	
typhoid or hepatitis B)			
Cholera		Free	
You're likely to have to pay for travel			
vaccinations against:			
Hepatitis B (when not combined with hepatitis	Patient	£40.00	
(A)			
Japanese encephalitis and tick-borne	Patient	£85.00	
encephalitis (Per Dose, 2 Required)			
Meningococcal meningitis	Patient	£60.00	
Rabies (Per Dose, 3 Required)	Patient	£55.00	
PLEASE NOTE WE ARE NO LONGER A YELLOW FEVER CENTRE			



INVOICE/ RECEIPT

BOOK PRICE LIST

Private Sick Note	£17.50
Short letter to employer	£17.50
Short insurance claim form (dates, diagnosis & signature)	£25.50
Medium Insurance Claim Form (short report/ extract from notes)	£30.25
Long Insurance Claim Form (Full report and Prognosis)	£106.00
Medium Examination (Taxi/HGV/Insurance/Slimming	Taxi £55.00 HGV/PSV £85.00 Slimming £25.00 Pilot £81.00
Single immunisation for travel	£17.80
Course of three immunisations for travel	£30.50
Hep B (course of three) Follow up blood test	£120.00 £39.50
Private smear tests (surgery fee)	£31.60
Cytology, patient invoiced directly by lab	£47.34 Total to patient £78.94
Other or Foreign visitor charge	£32.00 per 10 min consultation



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NHS SERVICES

Private Sick Note	C47 E0
Private Sick Note	£17.50
Holiday Cancellation Letter/Form	£25.50
Fitness to fly/ travel letter	£20.00
Insurance Questionnaire Form	£30.25
Shotgun Licence	£20.00
Fitness to exercise	£20.00
Ofsted Report (Paid by Patient)	£87.50
HGV/PSV Medical	£81.00
Single immunisation for travel	£17.80
Course of three Immunisations for Travel	£30.50
Hep B (course of three injections)	£120.00
Follow up blood test	£39.50
Private smear tests (surgery fee)	£31.60
Cytology, lab fee (invoiced directly by	
lab)	£46.80
	(Total £78.40)
Other or Foreign Visitor Charge	£32.00 per 10 min consultation

Fees valid for 2015-2016