

**SELDEN MEDICAL CENTRE**

**Fees for Non-NHS Services 2020**

**The NHS does not cover all services that patients may want or need. Some services can only be provided as a private service and these are paid for by the patient (or sometimes an employer or insurance company). All the items below need to be paid for in advance. Some require appointments and some can be done through the post/by collection. Please ask at the reception desk for further details. We accept payment by cash and debit/credit card. We do not accept cheques. We aim to complete reports and forms within two weeks. If your requirement is more urgent please discuss with Reception but be aware charges are increased due to the disruption to our clinician’s other work.**

**Forms, Letters & Medicals**

Private sick certificate/note £15

Private Health Form £30

 *e.g. Private health provider (ie BUPA)*

Holiday Cancellation Form £40

 *e.g. Travel company*

Sickness form £40

 *e.g. Insurance / Bank*

Fitness to participate form or letter £32

 *e.g. Attend a gym / play a sport*

Fitness to travel £32

Fitness to scuba dive form £60

 *e.g. BSAC/PADI*

Fitness to scuba dive form and medical £120

Pre-employment Form £60

Pre-employment Form NHS Staff £30

LGV/PCV Medical £100

Taxi Medical £100

Medical £100

 *e.g. Ofsted*

Adoption/Fostering Medicals (form AH)………….......£85

Local authority to pay

Adoption/Fostering Medicals (private)………………...£85

Capacity Assessment £120

 *e.g certificate provider for*

Capacity Assessment with visit……………………………..£150

Certificate of incapacity………………………………………..£73.50

Requestor to pay

**Reports**

Written Report £72

 *e.g. Employer/Insurance/Legal*

**Private Consultation Fees**

GP Consultation £36 - £72

 *Simple - Complex*

GP Home Visit £108

Paternity/DNA tests £40

**Travel Immunisations and Medicines**

Hepatitis A NHS

Typhoid NHS

Diphtheria Tetanus Polio Pertussis NHS

Hepatitis B £36

 Course of 3 paid in advance £100

 *NB Applies to adults and children*

**Insurance**

Insurance form for illness abroad………………………..…….£72

*Note: Escalation fee applies\*\*\*\**

eGPR………………………..……………………………………………..£100

Targeted report………………………………………..……….………£72

Supplementary report……………………………………………....£56

**Brief Summary Printout**

To ‘support’ claims for housing/benefits……………....No fee

**\*\*\*\*Escalation Fees**

Only if clinician agrees to provide the service

Within 24hr………………………………………………………….…100%