**Hep B Vaccination** 

£ 40.00 per Dose

**Hep B Booster** 

£ 40.00

**Tick Borne Encephalitis** 

£ 65.00 Per Dose

Japanese Encephalitis £ 85.00 per dose

Rabies £ 50.00 per dose

Meningitis ACWY £ 65.00

Malaria - Private Prescription

£ 15.00

PRIVATE SICK NOTE

OR

PRIVATE PRESCRIPTION

£ 20.00

**DRIVING LICENCE RENEWAL** 

OR

PASSPORT FORM

£ 20.00

#### DATA PROTECTION ACT, ACCESS TO PAPER RECORDS

Access to records only (no copies required)

£ NO CHARGE

#### DATA PROTECTION ACT, ACCESS TO COMPUTERISED RECORDS

Access to records only (no copies required)

**£** NO CHARGE

#### DATA PROTECTION ACT, ACCESS TO, AND COPIES OF RECORDS

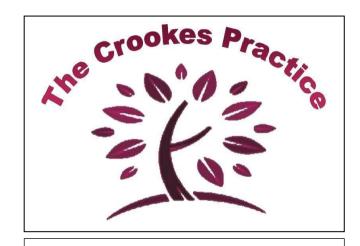
Access Fee of £10 is payable for a copy of your computerised medical record

#### **COPYING CHARGE**

A paper fee of £ 0.50p per sheet is payable for copies of your paper records up to a maximum of:-

PHOTOCOPY OF RECORD MAXIMUM CHARGE

£ 50.00



# NOT ALL SERVICES AT THE PRACTICE ARE AVAILABLE UNDER THE NHS

WHERE PATIENTS REQUEST NON-NHS
ITEMS OR
SERVICES A PRIVATE FEE MAY BE
PAYABLE

THIS LEAFLET LISTS THOSE FEES, WHICH ARE PAYABLE IN ADVANCE

For information regarding charges NOT included in this leaflet, please ask at reception

This leaflet is for guidance only and costs may change without notice.

**THANK YOU** 

TEL: 0114 267 1280

#### PRIVATE LETTER TO WHOM IT MAY CONCERN

£20.00

#### REPORT PREPARED FROM MEDICAL RECORDS

Reports prepared without an examination

£ 90.00

### FULL MEDICAL EXAMINATION AND REPORT FOR EMPLOYMENT

(Voluntary worker concessionary half price - £66.50)

£ 133.00

#### PRIVATE MEDICAL INSURANCE CLAIM FORMS

Claim forms, including letters of confirmation or other forms of certificate

OR

HEALTH CLUB (PATIENT FIT TO EXERCISE)

OR

**FITNESS TO TRAVEL CERTIFICATE** 

£ 40.00

DVLA NON-PROFESSIONAL DRIVER REPORT AND EXAMINATION

£ 50 00

DVLA NON-PROFESSIONAL DRIVER REPORT ONLY

£ 30.00

## HGV/PSV/TAXI DRIVER EXAMINATION AND REPORT

Includes (but is not limited to) HGV, Taxi, Pilot, employment medicals, and Council reports

Price range

£ 130.00

**WESTFIELD FORM** 

£ 16.50

PRIVATE SICKNESS INSURANCE

£ 40.00

**HOLIDAY CANCELLATION FORMS** 

£ 40.00

POWER OF ATTORNEY REPORT WITH EXAMINATION

£ 120.00

HOLIDAY CANCELLATION AND EXAMINATION REPORT

£ 120.00

SPORT MEDICAL

£ 100.00

**PRIVATE BLOOD TEST** 

£ 22.50

**PRIVATE PATIENT (per 10 min appointment)** 

£ 50.00

#### **Methods of Payment:**

We accept cash and cheques only.

If paying by cash, please have the correct change