

*Thank you for choosing to have a course of physiotherapy treatment at **Superphysiofit***

It is our aim to resolve your symptoms in the shortest period of time in order that you are able to return to all your daily activities safely. During your treatments we will ensure that you receive the best possible care at Superphysiofit Chartered Physiotherapy Performance Rehab Studio

In order to gain optimal results from this course of physiotherapy we ask you to read the following information carefully.

During a physiotherapy appointment, the therapist will perform a physical assessment and often as a result the treatment will also be physical. Consequently, you may be asked to:

- Undress to your underwear - gowns, shorts, vests are available. Perform movements or tests
- that may increase or reduce your symptoms. Be involved in some form of physical contact
- with the physiotherapist. Be involved in some form of internal exam as appropriate.

Physiotherapy should relieve your symptoms, however, certain treatments may initially increase your pain/symptoms prior to reducing them. Consequently it is not uncommon to feel an increase in pain/soreness later that day or the following day. If at any point post treatment you are concerned, please do not hesitate to contact us immediately.

Physiotherapy does have a very high success rate but recovery cannot be guaranteed with every patient.

During your physiotherapy appointment in order to ensure your comfort you are more than welcome to:

- Be accompanied by a friend or relative. Patients under the age of 16 **MUST** be accompanied by a parent/guardian at all times.
- Ask the physiotherapist to stop treatment at any time.

It is your duty to inform the physiotherapist of any **MEDICAL CONDITION** that you suffer; it is also imperative that we are informed about any artificial metallic implants including pacemakers.

If you have any questions at any point throughout the course of your appointment, please do not hesitate to ask.

It is standard procedure for us to inform your GP of your attendance at our clinic.

Your treatment will often involve you being taught rehabilitation exercises to do at home. If you are required to use any exercise equipment you will be advised how to do so safely and effectively, we **do not advise you to use any alternative equipment.**

Occasionally, it may be necessary to refer patients for a further investigation (x-ray, ultrasound or MRI) or an onward consultation with a specialist. This will be done in the knowledge of your GP.

FEES

Prior to commencing your treatment we will need you to inform us of how you intend to pay for your treatment. Our fees are also displayed on www.superphysiofit.weebly.com Self-Paying Patients

If you are a self-paying patient, fees MUST be paid after the completion of each treatment.

Private Health Insurance

For patients with private medical insurance, we are able to claim direct from your insurer on your behalf. I am CORU and ISCP registered and recognised by ALL Medical Insurance Companies. The invoice should be settled within 30 days of the invoice date. If your insurance company delay settlement you may be asked to settle the invoice. It is your responsibility to identify and follow your insurance company's referral procedure. You may need to obtain a claim form and, if asked, obtain a letter of referral from your GP. You MUST be aware of your level of cover and whether an excess applies to your policy. If you have an excess you are required to pay this after each treatment until the excess amount has been reached. For more info on how to claim refer to www.superphysiofit.weebly.com

Your insurance company will be charged at a previously agreed rate with Superphysiofit Physiotherapy.

Payment is accepted by cash, cheque, debit or credit card. Payments online also acceptable: Go to www.superphysiofit.weebly.com to proceed

Please tick the appropriate box:

I am responsible for the payment of my own fees.

I will authorise my health insurance company to discharge my fees.

Accounts must be settled within 30 days

YOU MAY BE CHARGED THE COST OF YOUR APPOINTMENT IF YOU FAIL TO ATTEND OR CANCEL AN APPOINTMENT WITH LESS THAN 24 HOURS NOTICE. Please read terms and conditions. Download and sign the document as as required.

I hereby acknowledge receipt of the above information and agree to the terms and conditions set out on this form.

Signed: Date:

Printed: Patient No:

I give consent to Superphysiofit Physiotherapy to process my personal and sensitive data for the purpose of Physiotherapy treatment, and understand my records will be kept for the benefit of future treatment. I give consent to Superphysiofit to contact me via Email or Phone for medical purposes only

I Understand I have the right to request I my personal data be removed from your system at any time after treatment has concluded.

Signed: Date:

Printed: