



📍 B.Tech Pod (SA)
📧 maddockspodiatry@gmail.com
✉ maddocksdancepodiatry.medeweb.co.za
📱 @DancePodiatrist
☎ 011 883 0365 📠 072 046 5001

Parkmore Health & Wellness
77, 11th Street, Parkmore
Sandton, 2196

PR NO: 0682497

TERMS AND CONDITIONS

AGREED TO BY PATIENTS / PARENTS / LEGAL GUARDIANS

Please ask us, at the practice if you, the patient, do not understand any of the clauses below.

PRICING/FEES AND PAYMENT

1. Fees are set according to the following principles:
 - 1.1. This Practice is a cash practice and bills according to a billing policy.
 - 1.2. The reimbursement terms and tariffs applicable to medical scheme patients vary from scheme to scheme, and even from plan to plan. You have to obtain those details from your scheme. If you are concerned about the amounts, you have to talk to your scheme. As aforementioned this scheme is a cash practice and does not deal with your medical scheme at all.
 - 1.3. **Our fees cover your Practice visit (i.e. the consultation) and any equipment or medicines used in the consultation.**
 - 1.4. Our fees exclude the costs of the hospital (admission, ward, theatre and other fees), anaesthetists, pathologists (for blood tests), radiologists (for X-rays and scans) and therapists involved in your care. You have to discuss their fees with them.
 - 1.5. Our fees for procedures done in hospital/theatre may be up to 300% of medical aid rates.
2. Please note that the cost of healthcare sometimes depends on how your body reacts to treatment and/or operations. The law allows us to step in to save your life, or to prevent or reduce harm to you. We will charge for the costs of this.
3. **All accounts must be settled immediately after each consultation.**
4. By choosing the Practice, you –
 - 4.1. Confirm that the person indicated on the practice form as belonging to the scheme as principal member or dependent, is indeed a member with a valid membership at the date of visiting the practice.
 - 4.2. Accept that we do not submit accounts to medical schemes. You have to pay us before you leave the practice after a consultation, and submitting to your medical aid is your responsibility
5. **You, if you are an adult, remain fully liable to settle the full account, irrespective of whether your scheme gave pre-authorisation or not.** This also applies if you are a dependent on someone else's medical scheme. In some cases medical schemes will only pay a portion of the treatment costs, and there is then still a part of the costs/fees outstanding. You are liable to pay this to us immediately on the day of consultation.

6. If your account is not paid after the 30 calendar days, we will give, in terms of the National Credit Act, notice of 20 working days that your account is in arrears. If you fail to settle the account within another 10 days, the account will be handed over for debt collection. **This may result in you having a bad credit record.**
7. We will charge the maximum amount of 2% interest, as allowed by the National Credit Act, per month on all outstanding accounts. You will also be responsible for all costs relating to the debt collecting, such as commissions and fees levied by the debt collector or attorney.
8. If you feel that your medical scheme should have paid in full, you can lay a complaint at the Council for Medical Schemes by fax: (012) 431-0608 or at this email address: complaints@medicalschemes.com. If you feel that terms and conditions of the scheme are unfair or benefits were not communicated clearly, you can complain at the National Consumer Commission at fax: 086 151 5229.

ON TIME OF PERFORMANCE OF SERVICE

9. Although we will do our best to render the services at the time we set, sometimes **a previous patient may require a longer time or an emergency has to get preferences.** By agreeing to our services, you agree to this uncertainty. We will, if possible, inform you if we run late.

CONFIDENTIALITY

10. This document constitutes a contractual agreement by the practice to protect all personal information and hold it in confidence to the extent required by law.
11. We will use your information only in relation to your healthcare. If any of your information is required for the purpose of research, education, or marketing, you will be notified and given an opportunity to give informed consent. In general, we keep all your information confidential. As an adult or as a consenting child over the age of 12, **we can only release information with your written consent**, even if a family member requests the information. Please provide us with that consent if you want us to be able to disclose certain information to a specified family member. The Practice will not under any circumstances disclose information without your consent.
12. The following special cases exist where the law compels us to disclose your personal information and

by agreeing to our services, you acknowledge this legal duty that we have to disclose:

- 12.1. To your medical scheme: a diagnostic code and details of the treatment and/or operation, so that the scheme can evaluate whether it falls within your benefits.
- 12.2. To the Compensation Commission or the Road Accident Fund: if you want to claim from them in cases of work-related illness or injury, or in the case of a motor-vehicle accident, all details they require of us.
- 12.3. To referring healthcare professionals others involved in your care: information that is necessary and in your best interest will be shared with such healthcare professionals in terms of the National Health Act.

13. Some medical schemes provide all information on all the dependents on a scheme to the principal (main) member. We do not accept liability for any personal information that is disclosed as a result and you should direct queries on this to the medical scheme you belong to.

PURPOSE AND NATURE OF HEALTHCARE

14. **You confirm that you understand that in healthcare results cannot be guaranteed.** Results also depend on how one's body reacts to the treatment and/or operations.
15. **You confirm that you understand that your own behaviour or that of a child or dependent may affect the outcome of the healthcare received.** You agree to follow the instructions provided to you by the healthcare professionals and/or come for follow-ups, etc. If you do not do this, you undertake to not hold the Practice and its staff liable for any negative consequence. _____ (initial)

CHILDREN AND HEALTHCARE

16. **You confirm that you understand that, as a parent or legal guardian, you are legally liable to cover the cost of your child's healthcare,** even if the Children's Act allows the child to provide consent to treatment without your consent (children 12 – 18 years who understand the implications of the treatment). You also confirm that you understand that there is a special legal dispensation and forms that must be used in cases of operations on children.

EQUIPMENT, DEVICES AND MEDICINES ("GOODS") WE USE / PRESCRIBE / MANUFACTURE

17. If we have to substitute a medicine or device with another one, we will obtain your consent for that. This is however not possible when you are in theatre, but we will inform you of that afterwards. In theatre we will only substitute if necessary, such as when certain goods are not available, or are not working for your specific requirements. If you are offered a substitution at a pharmacy level, ask the pharmacist whether such substitution would be in your best

interest, or ask us at the practice. Remember that the law only allows for generic substitution (the same molecule) and does not permit therapeutic substitution (another molecule).

18. Pharmacy- and health legislation prevents us from taking back any equipment, devices, orthoses/insoles, or medicines we have provided to you. We can also not refund you in these circumstances.
19. If there is a proven quality or performance fault with the goods, we will contact the supplier, who will deal with the matter. They will decide on whether a repair, refund or replacement would be provided. Note that each manufacturer may have its own rules in this regard. In general, if you have made changes to the goods, you may invalidate any warranty.

APPOINTMENT POLICY

20. If you are 15 minutes, or more, late for your appointment, the Practitioner may or may not see you. This is entirely at their discretion.

21. Appointments not cancelled within 24 hours notice will be charged for, as per the Billing Policy of this Practice.

22. Please note that from time to time and due to an emergency, the Practice may run late, we will endeavour to contact you and inform you of this.

COMPLAINTS PROCEDURE

23. If you have a grievance regarding the Practitioner, reception staff, service you received or anything else relating to this practice, please request the complaints form to be sent to you via email, from the practitioner, receptionist, or it can be found on the website. Fill it in and return it to the practice where it will be dealt with in a timeous manner.

24. We request that you take your grievance up with the practice first, before embarking on other routes.

PATIENT / CLIENT / CONSUMER DUTIES (NATIONAL HEALTH ACT, 2003)

25. You must adhere to the rules of the Practice and any instructions given to you by staff or healthcare professionals.

26. You have the right to ask questions and to have them answered. If you do not ask any questions, we will assume that you have understood everything and are fine with everything.

27. You and/or your family or other persons that come to the Practice should not harass the healthcare professionals and staff. They must be treated with respect. If not, we are allowed by law to refuse to treat- or to continue to treat you or your family. In such cases we will refer you to another Practice.

Signature of patient / parent / guardian: _____

Date: _____

Signature: _____

Witness confirming that s/he understood and agrees to the above terms and conditions.



📍 B.Tech Pod (SA)
🌐 maddockspodiatry@gmail.com
✉ maddocksdancepodiatry.medeweb.co.za
📱 @DancePodiatrist
☎ 011 883 0365 📠 072 046 5001

Parkmore Health & Wellness
77, 11th Street, Parkmore
Sandton, 2196

PR NO: 0682497

BILLING POLICY

1. This practice charges the fees it regards as appropriate in terms of the experience, services and training of the professionals working in the practice, as well as the cost-base of the practice. Competition law dictates that practices may not agree to charge the same or similar fees.
2. A general fee list, as well as the most commonly used groups of codes, is available on the overleaf of this page, and on the website.
3. Fees are increased on an annual basis, at the beginning of each year, and patients will be notified of this via email, on the website and by notices displayed in the Practice.
4. The practice will provide patients with a price of services and/or goods, and where it is unable to do so, it will provide a cost estimate to the patient. It should be noted that healthcare is not an exact numerical science, and the duration of services, or the number of items used cannot always be exactly estimated. In some cases the amount of medicine needed are calculated on the specific patient's needs and factors such as, for example, weight.
5. In many cases, other health facilities, such as hospitals, theatre's, clinics, other doctors (such as anaesthetists, pathologists, etc.), or other healthcare professionals (occupational therapists, physiotherapists, etc.) will be involved in the patient's healthcare. Such facilities and professionals will charge their own fees in addition to the fees of this practice, if they also render healthcare services to you.
6. This practice is not contracted to any medical aid schemes and charges different rates to those that may be covered by your medical scheme. It is the patient's responsibility to know what their medical aid does and does not cover, and whether it is from their main benefit or savings.
7. This practice will provide the necessary information for the patient to claim from their medical aid, however, medical aid claims are the responsibility of the patient / person responsible for the account.
8. Your medical scheme may require pre-authorisation and/or a motivation prior to certain treatments. Pre-authorisation or scheme approval is, according to schemes, no guarantee of payment.
9. This practice may charge up to 300% of medical aid rates for procedures done in hospital/theatre.
10. Motivations and reports will be charged for at an hourly rate of R1000.00
- 11. ALL INVOICES ARE TO BE SETTLED IMMEDIATELY AFTER EACH CONSULTATION.**
12. Overdue accounts, not paid within 30 calendar days from the invoice date, will get 20 calendar days' notice, where after we will refer your account to an attorney or a debt collector. This will attract additional collection- and other fees, which will be for the patient's account. We reserve the right to charge interest of 2% per month on overdue accounts, as per the National Credit Act. Failure to settle outstanding debts may lead to the person responsible for the account being placed on a list portraying their credit record.
13. **Appointments not kept, or cancelled with less than 24 hours' notice, will be charged for.** Please see code 101 on the billing list overleaf. Your medical scheme will not reimburse you for this code or your missed appointment.
14. Please ensure that we always have your latest contact details to prevent you from missing any important communication from us. We may contact the alternate person(s) indicated on your personal information form if we cannot get hold of you and your account remains unpaid.
15. Patients are encouraged to approach us early on if they experience problems with the payment of the account.
16. In deserving cases, we may reduce our fees to accommodate such patients, upon request.
17. This practice does not do medical-legal cases, such as employment, insurance, Road Accident Fund and Compensation Fund (workplace injuries/disease).
18. Information regarding accounts will be sent via email as the primary method of communication, as well as phone calls and text messages.

Initials: _____

BILLING LIST 2018

006	More than 1 patient seen at a residence	R128.02
009	Admin of Injection - Per admin	R19.94
010	General Podiatric Care 15 min	R58.91
011	General Podiatric Care 30 min	R117.60
012	Extended care for chronic disease or ulcer management	R111.44
013	General Podiatric Care >30 min	R178.08
014	Chemotherapy First Lesion	R88.82
015	Chemotherapy Subsequent lesion	R43.68
016	Cryotherapy first lesion	R318.00
017	Cryotherapy Subsequent lesion	R159.00
018	Diathermy first lesion	R318.00
019	Diathermy Subsequent lesion	R159.00
021	Nail Wedge Resection 1N1S + Phenol	R742.00
022	Nail Wedge Resection 2N1S + Phenol	R1,166.00
023	Nail Wedge Resection 1N2S + Phenol	R954.00
024	Nail Wedge Resection 2N2S + Phenol	R1,590.00
025	Avulsion with matrix phenol	R954.00
031	Avulsion without matrix phenol	R795.00
040	Infection control	R18.03
041	Remedial therapy	R73.81
042	Sterile Pack	R88.82
043	Biomechanical Examination	R265.00
044	Suturing (incl consult)	R117.60
046	Incision biopsy	R88.82
047	Removal of foreign body	R236.43
048	Cryopen Cartridge 23g / Suturing	R100.00
051	Impression Taking	R88.82
052	Orthotic repair	R300.00
053	Temporary orthotic / corrective component	R215.00
054	Prescription Covering	R159.00
055	Silicone devices: digital	R81.42
056	Computerised Gait analysis	R295.23
057	Template Measurement	R43.68
058	Immobilization casting	R159.60
059	Simple insole: one foot	R55.44
060	Silicone devices: metatarsals	R161.28
061	Simple Innersoles: Both Feet	R303.07
063	Prescription Orthoses: One Foot	R287.95
064	Silicone devices: heel	R239.57
065	Prescription Orthoses - pair	R575.00
067	Preformed moulded insoles: Adult both feet	R332.98
069	Preformed moulded insoles: Adult one foot	R165.54
071	Preformed moulded insoles: Child both feet	R256.48
073	Preformed moulded insoles: Child one foot	R128.02
101	Appointments not kept	R500.00
146	Excision biopsy	R134.06
201	Sterile Surgical Blades	R15.01
203	Wound Dressing Material	R30.24
205	POP / Foam Box	R110.00
207	Orthotic Material Fee	R178.08
209	Simple Insole Material Fee	R88.82
211	LA per ampule	R30.24
213	Injection medication fee (other than LA)	R30.00
215	Padding & Strapping: digital, per foot	R85.00
217	Padding & Strapping: metatarsal, per foot	R106.00
219	Padding & Strapping: heel, per foot	R106.00
301	Consultation 5-10 minutes	R125.22
302	Consultation 11-20 minutes	R250.10
303	Consultation 21-30 minutes	R416.64
304	Consultation 31-45 minutes	R625.52

General Podiatry Care	011, 040, 201, 303	R 567.28
Biomechanical Evaluation	040, 043, 056, 304	R 1 203.78
Orthoses	054, 057, 065(X4), 207	R 2 680.76
Nail Surgery	009, 021, 040, 042, 203, 211, 304	R 1 604.96 - R 2 672.37

Initials: _____



Megan Maddocks

Podiatrist

B.Tech Pod (SA)
 maddockspodiatry@gmail.com
 maddocksdancepodiatry.medeweb.co.za
 @DancePodiatrist
 011 883 0365 072 046 5001

Parkmore Health & Wellness
 77, 11th Street, Parkmore
 Sandton, 2196

PR NO: 0682497

PERSONAL DETAILS

PATIENT

MAIN MEMBER

if not patient

TITLE		
INITIALS		
NAME		
SURNAME		
ID / DOB		
Med Aid DEP No		
EMAIL		
CELL PHONE		
HOME PHONE		
WORK PHONE		
ALT CONTACT		
OCCUPATION		
EMPLOYER		

HOME ADDRESS		MEDICAL AID
UNIT & COMPL		
No & STREET		MEDICAL AID PLAN
SUBURB		
CITY		MEDICAL AID NO
PROVINCE		
CODE		

POST ADDRESS		NEST OF KIN
PO / POST NET		
SUBURB		RELATIONSHIP
CITY		
PROVINCE		CONTACT
CODE		

How did you find out about Megan Maddocks Podiatrist?	
REFERRAL FROM	
INTERNET	
OTHER	

I confirm that the above details are correct

DATE:	NAME:	SIGNATURE:
-------	-------	------------