

**Academy Medical Centre
Academy Street
FORFAR
DD8 2HA**



**Tel: 01307 462316
Fax: 01307 463623**

Referral to Private Providers for Treatment

Should you request a referral to a Private Hospital/Provider, we are happy to do this.

Please note that the whole episode of the treatment should be provided by the Private Provider, ie blood tests and other tests, suture removal, dressing changes, routine wound check, prescribing during your episode of private treatment etc, and the Practice should not be involved in any aspects of this episode of treatment.

It is the Private Providers responsibility to issue a Fit Note covering the entire anticipated period off work, but if any longer time off is then required when you are no longer under the care of the provider then this would be the practice responsibility.

We will have advised them so at the time of writing your private referral.

Should you require further information or clarification around this then please contact the Practice Manager.

Drs MacCallum, Thomas, and Denholm.

Signed (Doctor/Referrer)

I _____ (insert patient's name) agree to the above conditions prior to

The referral to _____ being made.

Signed _____ Date _____

**Dr K S MacCallum Dr C F L Thomas
Dr J Denholm**