

General Policies and Fees

January 2020

INSURANCE

Dr Ducasse operates a private clinic. Treatments and services provided are not covered by the Quebec Health Insurance Plan (Régime d'assurance maladie du Québec). All fees including honoraries, products and accessory costs must be paid by the patient directly to Dr Ducasse by (cash, Visa or Mastercard only) at the end of each visit. Debit cards or cheques will not be accepted. Certain treatments and products may be covered by your personal health insurance plan such as ultrasounds and cortisone. A detailed invoice will be provided with the useful information, such as the Drug Identification Number (DIN) of the products that were used.

HEALTH INSURANCE CARD NUMBER

Your Health Insurance Card Number (RAMQ card) will be needed to open or update your medical record. This information will be used to allow the transfer of your medical information to the public health system and/ or to other practitioners. This is to properly identify patients who have similar names in our clinical database.

FEES

Treatment, fees and services provided by Dr Ducasse are listed on our website at www.dreducasse.com. The patient must agree with these fees by signing the document prior to the visit. If you should have any questions or concerns do not hesitate to communicate with Dr Ducasse's assistant.

SPECIFIC CONSENTS

In some cases, treatments may have side effects or contraindications. Each patient receives an information document prepared by Dr Ducasse before any treatment and will be asked to give their signed consent.

COMMUNICATION

Communications with patients can be done via email. If you should have any concern about emails security and prefer using fax or regular mail, please let us know and we will update your preferences in your medical file. Note that medical exam results are delivered only by phone or fax or during a follow-up visit at the clinic.

NEWSLETTERS

Dr Ducasse can provide 4 newsletters yearly to inform her patients about developments in the research about regenerative medicine and prolotherapy, clinic schedule and services. According to the Canadian Anti-Spam Legislation, Dr Ducasse must obtain your consent before sending a Commercial Electronic Message (CEM).

Please check the appropriate box below:

- I agree to receive Dr Ducasse's newsletters.
- I do not agree to receive Dr Ducasse's newsletters

Date: _____ (day / month / year)

Patient: _____

Witness: _____