

## FEES FOR COMMON UNINSURED MEDICAL SERVICES

*Revised and Effective March 1, 2019*

<b>SERVICE</b>	<b>FEE</b>
Sick Note, Back to Work Note, Daycare Note	\$20
Missed Appointments <i>(without at least 4 hours notice)</i>	\$40
Insurance Notes <i>(for Physiotherapy, Chiropractor, Massage, Orthotics, etc.)</i>	\$20
Attending Physician's Statement	\$145
Disability Tax Credit Application	\$50
Driver's License Physical & Form <i>(includes assessment &amp; form completion)</i>	\$125
General & Other Forms	\$30 per 5-minute for time to complete <i>(or part thereof)</i>
Cosmetic Procedures: Liquid Nitrogen (up to 4 lesions) Liquid Nitrogen (5+ lesions) Simple Lesion Shave/Punch Full Lesion Excision	\$25 (per treatment) \$40 (per treatment) \$125 \$175
Photocopies/Printing <i>(when patient requests)</i>	\$5 for first five page +\$0.50 each additional page
Faxing Documents <i>(other than prescriptions)</i> <i>(when patient requests)</i>	\$5 for first five page +\$0.50 each additional page

Physician Consultation via Telephone <i>(Direct consultation with the doctor)</i>	\$40 per encounter
Physician Consultation via Email <i>(Direct consultation with the doctor)</i>	\$40 per issue
Completion of Form Physicals for schools and camps	\$30
Completion of Form Physicals for employment or fitness	\$40
Physician Medical Advice via Email or Phone	\$40 per issue
Travel Cancellation Insurance Form	\$40
Life Insurance Death Certificate	\$50
Medical Certificate for EI Compassionate Care Benefits	\$55
CAS Application for Prospective Foster Parent	\$60
Insurance Medical Examination <i>(includes assessment and report)</i>	\$240
Citizen and Immigration Canada Medical Report	\$145
Insurance Certificate OCF-3 Disability Certificate	\$145
Insurance Certificate OCF-18 Treatment Plan	\$145
Insurance Certificate OCF-19 Catastrophic Impairment	\$120
Insurance Certificate OCF-23 Treatment Confirmation	\$145

Prescriptions Without a Visit	\$20
Transfer of Medical Records	
Paper Chart	\$35 for first 20 pages and \$0.30 per page thereafter
on CD	\$60
TELUS PS Suite EMR file * (Organized, functional EMR file. Accordingly, the receiving physician may wish to pay partial or full fee here)	\$100 *
Services for Patients without OHIP	OMA rates (OHIP fee x 2.29)

***Subject to 13% HST where applicable.***

***Fees not paid within 60 days will result in additional 10% per month for interest & administration fees.***

***Failure to pay overdue fees may result in discontinuing patient-physician relationship.***