



PATIENT CONSENT

751 King Street West, Suite 310
 Kitchener, ON N2G 1E5

T (519) 603-0505 F (519) 653-2012

I, _____

of the following address:

consent to treatment by the homeopath of the K-W Homeopathic Medicine and Wellness Clinic.

I confirm that the decision to seek homeopathic treatment is solely my decision. I further confirm that the homeopath has represented to me that any treatment provided is in no way intended to be an alternative treatment to what is or may be recommended by a physician. Furthermore, I acknowledge that I am encouraged to pursue all recommendations of my physician for treatment.

I understand the cost of treatment and agree to pay my account according to the guidelines set by K-W Homeopathic Medicine and Wellness Clinic. I also understand that all fees are non-refundable.

All information disclosed is confidential and remains within the premises of K-W Homeopathic Medicine and Wellness Clinic.

Dated and signed this _____(day) of _____(month)_____ (year)

Signature _____ Witness _____
 (if under 18, parent or guardian signature)

Cost of Treatment*	Adults	Children (ages 0 – 18) and Seniors (ages 65 +)
Initial Constitutional Consultation	\$ 280.00	\$ 238.00
Follow-up Visit	\$ 95.00	\$ 80.00
Acute Consultation	\$ 40.00	\$ 34.00
Telephone Consultation	\$ 35.00	\$ 35.00
Follow-up Consultation by telephone	\$ 60.00 \$ 60.00	\$ 60.00 \$ 60.00
Nutritional Analysis	\$ 60.00	\$ 60.00
Bach Flower Consultation		

* All prices to be understood HST extra. **Prepaid packages available.**

Remedies are charged at \$ 7.00 resp. \$ 10.00 (rare remedies) each. Personal Bach Flower compositions are \$ 10.00 each. Postage is charged extra when a remedy is mailed to a patient.

Cancellations

48 hours notice is required for cancellations. A late cancellation fee of half of the amount of the session will apply. In case of emergency cancellations after hours please call 519-603-0505 and leave a message.