

TERMS AND CONDITIONS

By making an appointment with us you acknowledge that

1. You are under the care of your Specialist at The Medical Chambers Kensington Ltd or La Clinique Française Ltd or TMCK One Ltd trading as The Dental Chambers Kensington (all referred to as TMCK we and us) as appropriate who may involve other Specialists in your care and treatment if required.
2. TMCK's and your Specialist's contract is with you and not with your Insurer or your Sponsor. You agree to pay any fees and charges not paid by your Insurer or your Sponsor when due. TMCK and/or your Specialist **MAY** at their discretion charge a cancellation fee and you can find your Specialist's cancellation policy on his/her profile on our website. Fees and charges are payable at the time of consultation and/or treatment and, where there are delays in payment, we reserve the right to charge interest at 8% over base rate per annum calculated from the date of the invoice to the date of payment. Any collection costs incurred by TMCK and/or your Specialist, including fees payable to solicitors, will be added to the amount payable.
3. We **MAY** ask you to pay in advance for blood tests, treatments, long-term treatments, consultation and procedure fees and similar and **MAY** ask you for your credit-debit card details to secure your appointment or proceed with your treatment, even if you have Private Medical Insurance. We do this to cover any shortfall or excess.
4. You consent to us charging the card you have stored with us for any amounts unpaid.
5. If you are insured, we recommend that you contact your Insurer prior to your consultation, treatment and/or procedure to check the terms of your policy and the amount they will pay. Shortfalls in the amount your Insurer pays to TMCK and/or your Specialist are payable by you. We will need the identity of your Insurer, your membership number and your pre-authorisation number prior to your appointment. Without this information, we will ask you to pay us at the time of your appointment.
6. TMCK accepts payment for services provided to you only from Insurers and/or Sponsors with which we have a prior written agreement. Where we have this agreement, you must give us your Insurer pre-authorisation number or a Letter of Guarantee, both specific to your treatment. We will ask you to pay us at the time of your appointment/treatment if we do not have a prior written agreement or you do not give us this pre-authorisation number or letter.
7. TMCK is not responsible for the loss of or damage to any valuables, cash or other items belonging to you or any persons accompanying you.
8. Medical and dental information will be kept confidential. We will only share it with those involved, or who may become involved, in the provision and administration of your treatment and care, or to their agents, and to any person or organisation responsible for paying TMCK's and/or your Specialist's fees and charges, or their agents. Everyone with access to your records is trained in maintaining confidentiality and is governed by a legal and professional duty to keep your information private. All information about you is held securely and there are electronic safeguards to help prevent accidental loss. We will not disclose information over the telephone unless we are certain that we are talking to you. Information will not be disclosed to spouses, partners, family or friends unless we have your prior written consent. We will not leave messages with others.