



Agreement before the start of treatment

Being aware of my entitlement to necessary and economic treatment under the conditions of statutory health insurance (according to § 12(1) SGBV) and private medical care (§ 1(2) GOÄ), I wish to receive the following diagnostic and therapeutic services and, if necessary, prescriptions for medication.

I am aware that these services are useful for me, but are not urgently medically necessary and are not part of a health insurance or private medical care and I know that there may be inquiries by statutory health insurance companies, private health insurance companies or benefit agencies if the treatment bill is presented to them and that reimbursement of these services is therefore not fully guaranteed or may not be possible.

I was informed about these facts in a personal conversation by my attending physician prior to the start of treatment.

I hereby expressly declare that I wish to receive these treatment measures in accordance with the enclosed cost statement.

This request has not been made on the initiative of my attending physician.

DESCRIPTION OF SERVICES and COST SCHEDULE

for hormone or screening tests and preventive diagnostic and therapeutic measures

See attached invoice

Dr. med. Harry Tschebiner
Gynecology | Prevention | Aesthetics

The above services have been explained to me in detail. I request that they be performed in accordance with the Gebührenordnung für Ärzte GOÄ 96 and its analogous evaluations, as well as the calculation of material costs, at my own expense.

I am aware that the medications prescribed for me in the course of treatment are not reimbursable in every case. I have received a copy of this agreement.

Munich _____

Patient