

COVID-19

I understand that I am opting for an elective medical treatment/procedure/surgery

I understand that the novel Coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organisation and that COVID-19 is extremely contagious and is believed to spread by person-to-person contact; and, as a result, social distancing is recommended. This is not entirely possible with my proposed treatment; however, I am satisfied that safety measures are in place to minimise risk as much as possible, and patient contact will be kept to an absolute minimum in line with medical need.

I understand the Management and Clinical Staff are closely monitoring the COVID-19 situation and have put in place reasonable preventative measures aimed to reduce the spread of COVID-19. However, given the nature of the virus, I understand that there is an inherent risk of becoming infected with COVID-19 by virtue of proceeding with treatment. I hereby acknowledge and assume the risk of becoming infected with COVID-19 through this elective medical treatment/procedure/surgery, and I give my express permission to proceed.

I understand the COVID-19 virus has a long incubation period during which carriers of the virus may not show symptoms and still be highly contagious. I understand that COVID-19 can cause additional health risks, some of which may not currently be known at this time, in addition to those risks associated with medical treatment/procedure/surgery itself.

I have been given or can ask for the option to defer my medical treatment/procedure/surgery to a later date. However I understand all the potential risks, including but not limited to the potential short-term and long-term complications related to COVID-19, and I would like to proceed with my desired medical treatment/procedure/surgery.

I confirm that I am not suffering with any of the following symptoms of COVID-19 listed and agree to a 2 metre rule where needed.

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If you are suffering from any of the following symptoms leading up to your appointment, please contact your artist

Fever

Shortness of breath

Loss of taste or smell

Dry cough

Runny nose

Sore throat