



Naam & voornaam patiënt: pat\_famnaam  
pat\_vnaam  
Mutualiteitsgegevens: Nr: mut\_mutnr  
LidNr. mut\_lidnr Ger1 /Ger2:  
mut\_cger1 /mut\_cger2  
Opnamenummer: opn\_opnrr  
Kamer nummer: stay\_vpenr – stay\_kamnr (stay\_bednr)

Erkenningsnummer: 7/10/143/91

## Declaration of admission

### for conventional admission: choice of room and financial conditions

#### 1. The aim of the admission statement: to have the right to make informed choices about financial consequences of your hospital admission

Every hospitalisation entails costs. As a patient, you can make some choices that have an important impact on the final costs. You can make those choices by filling in this admission statement. Before filling in and signing the admission statement, it is therefore very important to thoroughly read the explanatory document that was given to you along with this statement. Should you have any questions, please contact **Facturatie (tel 02/477 55 40) or Kassa Inschrijvingen Opnames (tel. 02/477 77 85).**

#### 2. Choice of room

**This will not limit my free choice of physician.**

I wish to be admitted and cared for in:

**two-patient room/a shared room**  
without paying extra fees or additional room charges

**an individual room**

Additional room charges of **157 euro** per day will be invoiced.

I have been informed that my treating physicians are allowed to charge extra fees of up to a **maximum of 175 %** of the legally fixed fees for medical services when I am cared for in an individual room.. **Not applicable to plastic surgery, oral maxillofacial surgery, ophthalmology and external obstetrics services, here is the maximum fee 300 %.**

#### 3. Admission of a child accompanied by a parent

I wish to accompany my child while he/she is admitted and cared for at the legally fixed rates **without paying extra fees or additional room charges.** I know that my child will be admitted in a two-patient room or a shared room.

I explicitly wish to accompany my child while he/she is admitted and cared for **in an individual room, without paying additional room charges.** I have been informed that the treating physicians are allowed to **charge extra fees of up to a maximum of 115%** of the legally fixed fees for medical services when a patient is cared for in an individual room.

I will bear the hotel costs for my stay as a parent (including bed, meals, drinks, ...) that will be charged at the rate mentioned in the price list of common goods and services.

**cost accompanying parent**       **cost accompanying parent WITH meals**

#### 4. Advance

I hereby pay an advance of **voorschot\_voorschot euro** for my stay.

This signed admission statement will constitute a receipt for the advance paid. The advance will be deducted from the total sum of the final patient invoice.

Every patient has the right to be informed about the financial consequences of a hospital admission and his/her choice of room. Every patient has the right to be informed by the physician involved about the costs of anticipated medical treatment he/she will have to bear. Along with this document, I have received an explanatory document stating the extra fees and additional room charges. This price list of the goods and services provided in the hospital can always be consulted. Please take into account that not all costs can be predicted.

Done in duplicate in Jette on currentdate for the admission starting on opn\_opntijdstip and valid as from opn\_opntijdstip om opn\_opnuur uur

<p>The patient or his/her representative</p>  <p>First name and name of the patient or his/her representative</p>	<p>The hospital</p> <p style="text-align: center;">UZBrussel Laarbeeklaan 101 1090 Brussel</p>
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*These personal data are asked for by the manager of the hospital in order to process your file and the invoices regarding your hospital admission correctly. By virtue of the Act of 8 December 1992 on the protection of privacy, you have the right to access your data and correct them.*

## 5. Billing conditions

All hospital costs will be invoiced by the hospital. Never pay your physician directly!

### Conditions of Payment of UZ Brussel

Wherever possible UZ Brussel will apply the third-party payer system. This means that if allowed by regulations we will charge the part of the bill payable by the health insurance fund directly to the fund. The third-party payer system can be used only if patients submit to us documents that prove their membership of an insurance institution.

All invoices must be paid within 20 days of the invoice date, preferably by bank transfer to IBAN account BE54 0969 2919 0097 (BIC address GKCCBEBB), stating our reference.

If you have questions about your bill, please contact our Invoicing Department by phone on 02 477 55 40, we are available by phone from 09h to 12h or by e-mail at [facturatie@uzbrussel.be](mailto:facturatie@uzbrussel.be)

If you would like to visit our department we will of course be happy to speak to you in person, please book an appointment by phone.

For questions concerning payments or payment problems, please contact the Accounting Department from 09h till 12h on 02/477 60 69 or by e-mail: [boekhouding@uzbrussel.be](mailto:boekhouding@uzbrussel.be)

An overview of your invoices can be found on your portal: [myuzbrussel.be](http://myuzbrussel.be)

All complaints concerning invoices must be made in writing, stating our invoice number and the reason for the complaint, and must be sent by post within fifteen days of receipt of the invoice to UZ Brussel, Dienst Facturatie, Laarbeeklaan 101, 1090 Brussels, or sent by email to [facturatie@uzbrussel.be](mailto:facturatie@uzbrussel.be).

Failure to pay any part of an invoice by the due date will automatically render you liable to pay default interest at the statutory rate over the unpaid amount without prior notice of default. For a first reminder you will be charged an administrative fee of €12,50. In the event of non-payment, the file will be transferred to our collection agency, after which a second and final reminder will follow, on which a fixed penalty of 40F00 euros will be charged. or the second and final reminders you be charged in each instance an administrative fee of €40. Failure to make payment after these reminders will result in a bailiff being instructed to collect the amounts owed.

In case of dispute, only the Justice of Peace Jette and the Corut of First Instance Brussels are competent.

If you are entitled to receive payments from us, you may charge us interest at the legal rate. The costs of your reminder and formal notice shall be borne by us.

## 6. Patient rights

### 1. Quality service provision

All patients are provided with the best possible service commensurate with medical knowledge and available technology. These services are provided while duly respecting the human dignity and autonomy of each patient, without any distinction on the basis of social class, sexual orientation or philosophical conviction. Care with a view to preventing, treating and alleviating physical and psychological pain forms an integral part of the patient's treatment.

### 2. Freedom to choose a healthcare practitioner

The patient personally chooses a healthcare practitioner and can reconsider that choice at all times. In some cases the law or circumstances peculiar to the healthcare can restrict that freedom of choice (e.g. mandatory admission of a person with a mental illness and where there is only one specialist in a hospital). On the other hand, every healthcare practitioner can refuse to provide a patient with services for personal or practitioner reasons, except in cases of emergency. If the healthcare practitioner stops providing treatment, (s)he must guarantee continuity of care.

### 3. Information on one's personal health condition

The healthcare practitioner provides the patient with all the information necessary to gain an understanding of his/her health condition (i.e. the diagnosis) and its probable evolution. The healthcare practitioner also indicates recommended future behaviour (e.g. there are certain pregnancy-related risks).

### 4. Consent for each intervention performed by the healthcare practitioner, with foregoing information

Before starting treatment, a healthcare practitioner attending to a patient must obtain such patient's voluntary and informed consent for the treatment. This means that the healthcare practitioner must have adequately informed the patient of the characteristics of the intervention. If it is impossible to procure the consent of the patient or that of his representative (e.g. in the case of an emergency), the healthcare practitioner provides all the necessary treatment and states this in the health records.

### 5. Carefully updated health records, including the possibility of perusal and obtaining a copy

The healthcare practitioner duly keeps the health records up to date for each patient, which (s)he (the healthcare practitioner) keeps in a safe place. If the patient chooses to have another healthcare practitioner, (s)he can request that his/her health records be transferred to guarantee continuity of care.

### 6. Protection of privacy

Subject to the patient's consent, only the persons whose presence is professionally justified may be present during treatment or an examination. No information whatsoever on the patient's state of health can be communicated to third persons, unless this is expressly provided for by law.

### 7. Lodging a complaint with the competent ombudsman

A person can lodge a complaint with a local ombudsman or Federal Ombudsman Service when (s)he is of the opinion that one of his/her rights as a patient has been infringed. The person concerned can have a confidant whom (s)he has designated assist him/her in this matter.