



Treatment contract

Dear customers, welcome to the Moosach veterinary practice!

Owner

Last name: _____ First name: _____

Street: _____ Hausnummer: _____

ZIP Code: _____ City: _____

Tel.: _____ Mobil: _____

Email: _____

Patient

Name: _____ Species: _____

Breed: _____ Birthday: _____

Sex: _____ Color: _____

- male neutered
 female unneutered

particularities: _____

Known previous illnesses: _____

Allergies/intolerances: _____

How did you hear about us ? _____

- Animal health insurance available: no yes
 complete insurance
 surgery insurance only

Name: _____ Policy Number: _____

Date

Sign

Dear customers, for better planning and to avoid unnecessary waiting times for you and your loved ones, we ask that you call us in advance. Further appointments and home visits can be arranged at any time by arrangement. Billing in our small animal practice is based on the valid GOT (fee schedule for veterinarians). **The bill must be paid in cash or with an EC card after the treatment!** Thanks very much!

Your practice team!



Declaration of consent of the animal owner

We ask you to confirm by your signature that you have taken note of this information.

Even after the entry into force of the DSGVO, it is not necessary to obtain the explicit consent of animal owners to the processing of their personal data, provided that the collection is necessary for the performance of the veterinary treatment contract (Art. 6 para.1 lit. A), DSGVO).

This covers the following data: Name of the animal owner, address, date of birth, cost unit, treatment days, services rendered according to GOT, medications and diagnoses.

The entry into force of the DSGVO does not change the applicable legal documentation and retention obligations, because according to Art. 17 para. 3 lit.b) DSGVO the deletion obligations do not apply insofar as the processing is necessary for the fulfillment of a legal obligation.

Thus, e.g. for the storage of tax-relevant veterinary documentation, the regulations for the storage of documents of § 147 Fiscal Code (AO) continue to apply. According to § 147 paragraph 1 lit.3 AO, the documents mentioned in paragraph 1 are to be kept for 6 or 10 years, depending on the type.

The professional regulations on documentation and retention obligations, in Bavaria in particular Section 16 Para. 1 AO, are also a suitable legal basis in terms of the DSGVO.

Accordingly, a deletion request by the animal owner can be objected to with regard to the existing legal standards on retention. After expiry of the retention periods, the above-mentioned data will be deleted. In this respect, the animal owner has a legal claim to the deletion of his data.

In addition, the patient owner has a right to information to the effect that he can demand information from the veterinarian at any time about the data stored about his person.

I hereby confirm that I have taken note of the fact that if my surgery is cancelled less than 24 hours before the appointment or if I do not show up, a **cancellation fee** of 50€-150€ (depending on the personnel involved in the surgery) will be charged.

I acknowledge that even if I have animal health insurance, the veterinary practice will not bill the insurance company directly. I was informed that, depending on the insurance contract, animal health insurance companies sometimes do not cover services under the GOT or only cover them to a limited extent.

I certify that I am not insolvent and that I am not in any consumer insolvency or bankruptcy proceedings.

Please note on the back →

With your signature YOU give your consent that your personal data and the medical data of your animal can be transmitted/used

to veterinary clearing offices / Agenda Inkasso / branch Unterhaching

to animal health insurance

to other veterinarians or clinics for further treatment

to laboratories and institutes for diagnostic purposes

for prescription drugs and feed/ TASSO (pet register)/ pet crematoria

and:

(please tick as appropriate)

for obtaining vaccination cards (voluntary, free service with disclaimer)

for receiving information about medical check-ups and current treatment options, invoices, receipts as well as findings by e-mail.

I can revoke my consent at any time (in writing by mail or e-mail).

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Signature of animal owner Date