VALMONT
Clinique privée de réadaptation

# Admission Conditions

*Last name, First name:*
*Room/Bed No.:*
*Ward:*

## STAY

### Compliance with guidelines

I undertake to comply with therapeutic guidelines, safety instructions and the rules of communal living throughout my stay. Disrespectful behaviour, threats, or verbal or physical violence towards patients, visitors or Clinique Valmont staff will not be tolerated. If these provisions are not observed, Clinique Valmont accepts no liability and reserves the right to take appropriate measures, including terminating the stay.

### Personal data

In accordance with data confidentiality legislation, the clinic may request or transmit information about me to healthcare and administrative professionals where necessary for the proper management of my stay. This data will be used to invoice the stay and the various medical expenses, as well as for medical follow-up.

### Additional examinations and transport

Any examination or transport outside the scope of your rehabilitation stay and requested by a doctor other than a Clinique Valmont doctor will be at your expense. You may submit the invoice to your insurer for possible reimbursement.

### Discharge and return home

Your return home is arranged by the liaison nurse.
On the day of my discharge, I must vacate my room by **10:00 a.m.** and then go to Reception to complete the discharge formalities.
Transport home is provided free of charge for privately insured patients up to a distance of 100 km.

### Room change for personal convenience

Any change to another room in the same category for personal convenience will incur a charge of **CHF 300.**

### Multidisciplinary case conference and ward round

These are organised as follows:

- Neurological cases: every Tuesday
- Musculoskeletal cases: every Wednesday



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## Leave authorisation



**All outings must be approved by the doctor according to the patient's clinical condition.**

### Personal leave:

Personal leave is an outing for personal convenience that is not part of the care plan. It may be authorised by the doctor for a maximum of 24 hours. Transport is the patient's responsibility; the patient must make arrangements with relatives or bear the travel costs.

### Therapeutic leave:

Therapeutic leave applies only to neurorehabilitation stays. It is not routine and is prescribed by the referring doctor in accordance with the patient's therapeutic plan. Its purpose is to promote independence, expose the patient and their relatives to conditions outside the clinic, and prepare for the return home. Its arrangements, duration and transport conditions are determined according to the medical assessment and rehabilitation goals.

## Involvement of third parties



Family members, relatives, representatives or accompanying persons may support the patient in accordance with the framework established by the Clinic.

However, they are not authorised to intervene in the organisation, modification or clinical management of the rehabilitation programme.

Any request, concern or proposal regarding treatment or the programme must be addressed to authorised members of the medical or rehabilitation team to ensure clear communication, continuity of care and coordinated management.

## Therapeutic plan, scheduling and therapy time



The therapeutic plan is a personalised and comprehensive plan developed by the multidisciplinary team to meet the patient's specific needs and promote independence.

Therapy scheduling is determined jointly by the multidisciplinary team and cannot be changed for personal convenience during the stay.

Therapies take priority over visits and are held Monday to Friday between 8:30 a.m. and 5:30 p.m.

Over a 7-day period, the mandatory therapy time is 450 minutes for an orthopaedic stay and 540 minutes for a neurological stay.

## Meals



Two menus per day are included in the package covered by my insurance.
A supplement will apply to à la carte restaurant orders (CHF 10 for a starter, CHF 20 for a main course and CHF 8 for dessert).



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### Smoking



The clinic is a non-smoking facility, including balconies. If I breach this rule, I may be charged a fine of CHF 300. Smoking is permitted by the benches at the clinic entrance on the 3rd floor, on the restaurant terrace and near the benches in the garden.

### Alcohol



The consumption of alcoholic beverages is permitted from Monday to Friday, limited to 1 dl with lunch and 3 dl with dinner. No quantitative limit is set at weekends.

This authorization is subject to there being no medical contraindication or individual restriction prescribed by a physician.

### Swimming pool



The swimming pool is available for unrestricted use:

- Monday to Friday, 3:30 p.m. to 4:45 p.m.
- Saturday, 2:00 p.m. to 5:00 p.m.; and
- Sunday, 9:15 a.m. to 12:15 p.m.

Use of the pool must remain compatible with the patient's therapeutic programme and any medical or therapeutic restrictions.

### Valuables



My valuables (jewellery, cash, etc.) must be placed in the safe in my room or at Reception. I therefore release Clinique Valmont from all liability in the event of loss or theft of valuables that have not been placed in a safe.

### Animals



Access for animals is restricted. They are permitted only by the benches at the clinic entrance on the 3rd floor, on the restaurant terrace and near the benches in the garden.

For hygiene reasons, feeding animals, birds or other fowl is prohibited inside the clinic and in its outdoor areas.

## INSURANCE COVERAGE AND OUT-OF-CANTON CONTRIBUTION



If my insurer reserves or refuses coverage, I undertake to pay the clinic without delay the amount corresponding to the costs of my hospitalisation. I also undertake to remit to the clinic any amount mistakenly paid to me by my insurer for treatment costs.

I certify that the details of my health insurance coverage are accurate.

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I have also been informed that if my canton of residence is not the Canton of Vaud, the out-of-canton contribution will be at my expense. We recommend contacting your insurer to determine whether these costs are covered.

Below are the indicative rates* for the out-of-canton contribution according to your canton of residence:

| Canton | Difference payable by the patient or potentially by supplementary insurance / per night |
|---|---|
| Neuchâtel | 101.- |
| Fribourg | 16.- |
| Geneva | 3.- |
| Valais | 109.- |

**These rates are approximate indications only. They may change depending on your health insurance.*

## EARLY DISCHARGE AT THE PATIENT'S REQUEST



I acknowledge that, if I terminate my stay early for **non-medical** reasons, Clinique Valmont is entitled to charge the patient a compensatory fee of CHF 2,000.00 corresponding to the loss arising from the organisation of the stay.

## AUTHORISATION FOR VISITS AND CALLS



I undertake to inform the clinic of my wishes regarding outside visitors and external calls:

- ☐ I authorise all visitors wishing to see me to come to the clinic, and I agree that the clinic may provide my room telephone number to anyone who requests it.
- ☐ I wish the clinic to refuse entry to all visitors wishing to see me and not to disclose my room telephone number.
- ☐ I provide the clinic with the names of the persons whom I authorise to visit me and to receive my room telephone number.

  Names of persons authorised to visit and contact me:

  ……

  ……

  ……

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## MAILING AUTHORISATION



☐ I authorise Swiss Medical Network to send me information and newsletters by email.

## SIGNATURE

☐ I, the undersigned, declare that I have read the internal regulations and accept their contents.

Last name, First name :

Place and date :

Read and approved

Signature of the patient or legal representative : ……

Reception approval: .....



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