

Dr Richard Ellis MD FRCP
Consultant Physician and Gastroenterologist
GMC No: 3261387

Consulting Rooms

Hampshire Health
Spire Portsmouth Hospital

**Private Secretary and
All Correspondence to:**

Pippa Williams
38 Green Lane
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NHS Hospital

Department of Medicine
Queen Alexandra Hospital
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14 April 2025

Mr James Saint
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Dear Mr Saint

Admission to Spire Portsmouth Hospital

I am writing to confirm the request I have submitted to the Spire Hospital for you to have the planned procedure under the care of Dr Ellis.

Please note, this is not confirmed until the hospital has confirmed they will accept the booking and have a bed and pre-assessment appointment available for you.

Planned procedure: Diagnostic colonoscopy, includes forceps biopsy of colon and ileum

Requested date: **6 May 2025** to arrive at the hospital at **2:00 pm**
Location: **Spire Portsmouth Hospital**

The surgical codes are **H2002 with X3510 (sedation)**
Dr Richard Ellis's fee will be £350

You will be contacted by the hospital to arrange a pre-assessment appointment. They will inform you of the latest hospital policy with regard to requirements around Covid, any visitor restrictions, plus the requirements for provision of a negative lateral flow test.

For insured patients

If you are insured, and haven't done so already, you should now contact your insurance company to ensure this will be covered, to establish the amount they will pay towards these costs and if there is likely to be a shortfall or excess amount to which you will be liable. If your insurance company will not cover this or will only pay towards some of the costs and you decide to proceed, it will be understood that you accept the fees and agree to pay any shortfall. Patients are liable for all fees, regardless of whether or not you choose to make a claim through a third party. Any payment should be made as soon as you receive notification from your insurance company of any amount owed. A separate invoice will not be sent to you.

Would you please ensure you let me have the authorisation/claim number for this operation so that I can include this on the invoice to your insurance company.

I hope this information is helpful to you, however please do not hesitate to contact me if I can be of any further assistance. If I have not already spoken to you regarding this date, I would be grateful if you would confirm receipt of these details above and that you will be able to attend.

Yours sincerely

P M Williams

Pippa Williams
Medical Secretary