



MyCare Plus Medical Centre
www.WESNHealth.com

Phone 905-273-4000 Fax 1-888-890-9293
E-mail: MyCarePlus@wesnhealth.com

Uninsured Services Fees

#	SERVICE	COST
W01	Physician Visits for Uninsured (Non-OHIP, Expired OHIP, or Invalid OHIP)	\$100
W02	Regular Sick Note or Doctor's Note	\$30
W03	Medical form (Student)	\$40
W04	Medical form (Work) 1-2 pages	\$40
W05	Medical form (Work) 3-5 pages \$20 for each additional page	\$90
W06	FAF form	\$80
W07	TTC Driver	\$30
W08	Ear wax removal (Ear cleaning) Unilateral (one ear)	\$40
W09	Ear wax removal (Ear cleaning) Bilateral (Two ears)	\$80
W10	Rx for Orthotics, Stocking or Massage	\$30
W11	TB test Step 1 only	\$50
W12	TB test Step 1 & 2	\$80
W13	Medical Record Fees: copy and transmission (First 20 pages) \$0.30/page thereafter	\$50
W14	Student/Work Medical Form, for purposes of employment, Pre-School, post-secondary, fitness clubs, Hospital or nursing home. includes: Doctor visit, Form filling, Blood work/Immunity requisition, vaccination update (not including vaccines), and TB test Step 1&2.	\$220 (If no TB test is required then only \$140)
W15	Driver medical examination (Visit "General Assessment" , form filling & urine analysis)	\$180
W16	School Immunization	\$120
W17	Insurance Certificate OCF- 3 Disability Certificate	\$160
W18	Insurance Certificate OCF-18 Treatment Plan	\$160
W19	Attending Physician's Statement	\$250
W20	Insurance Medical Examination (assessment and report)	\$250
W21	CRA Disability Tax Credit Certificate (form T2201)	\$180
W22	Canada Pension Plan (CPP) Disability Medical Report Form	\$90
W23	Canada Pension Plan (CPP) Narrative Medical Report	\$150

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W24	Certification of incompetence (financial) including assessment to determine incompetence	\$350
W25	Civil aviation medical examination report 26-0010E (001004)	\$300
W26	COVID-19 Recovery Certificate	\$80
W27	Skin lesion (e.g. Warts) removal or treatment Using medical blades (NON-OHIP)	\$25/Each
W28	Skin lesion (e.g. Warts) removal or treatment Using medical Liquid Nitrogen (NON-OHIP)	\$35/Each
W29	Fiberglass cast for fracture	\$130
W30	Dressing (NON-OHIP)	\$20
W31	Pregnancy test	\$10
W32	Wound Suture + Dressing (NON-OHIP)	\$20/stitch
W33	Only Dressing – Small wound (NON-OHIP)	\$25
W34	Only Dressing – Big wound (NON-OHIP)	\$50
W35	Medication for Intraarticular injection (for OHIP)	\$50
W36	Intraarticular injection + Medication (Non-OHIP)	\$90
W37	Foreign body removal + Dressing (Non-OHIP)	\$75
W38	Medical certificate employment insurance sickness benefits	\$45
W39	Blood Pressure monitor for 24 hours	\$80
W40	Deposit of Blood pressure monitor for 24H (for Full refund when return the device)	\$200
W41	Children's Aid Society (CAS) application for prospective foster parent	\$180
W42	Blood work (Lab)	-
W43	Travel Document filling	\$50
W44	One Cyst / Tag / Lipoma / Nail / wart or Lesion Removal - for Cosmetic Purposes	\$150
W45	No Show Fee	\$50
W46	Medical Records copy and transmission to Lawyer or Insurance office	\$90
W47	Physician visit related to Travel (Not covered by OHIP)	\$75
W48	Certified True Copy – one paper	\$25

E-Transfer: **Billing@wesnhealth.com**

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