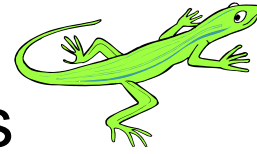




GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Betsi Cadwaladr  
University Health Board



# The NEWT Guidelines

for administration of medication to patients with  
enteral feeding tubes or swallowing difficulties

Order Form for annual resubscription to  
The NEWT Guidelines website (Secondary care)

- CURRENT SUBSCRIBERS ONLY

## Current details

Current username (block capitals please):

If you are not sure what subscription type is appropriate for you, go to [www.newtguidelines.com/access](http://www.newtguidelines.com/access).

Subscription type	Cost / year	No. of licenses	Line total
<b>Hospitals</b> (one hospital includes all satellite units within the same postcode, but not any associated units in different postcodes, which need a separate license) (20% discount for orders of more than one license)			
One named user (clinical)	£50 + VAT*		
Single area	£50 + VAT*		
Five areas	£180 + VAT*		
Full hospital access – less than 100 beds	£150 + VAT*		
Full hospital access – 100 – 500 beds	£300 + VAT*		
Full hospital access – more than 500 beds	£490 + VAT*		
<b>Mental health trusts and long-term residential care</b> (20% discount for orders of more than one license)			
Pharmacy team only – less than 100 beds	£120 + VAT*		
Pharmacy team only – 100 – 250 beds	£165 + VAT*		
Pharmacy team only – 251 – 500 beds	£240 + VAT*		
All staff – less than 100 beds	£210 + VAT*		
All staff – 100 – 250 beds	£270 + VAT*		
All staff – 251 – 500 beds	£340 + VAT*		

Subscription license is valid for 12 months from the previous expiry date.

\* VAT should be added if applicable

Please turn over....

<b>If you have received a special quotation from us, please indicate here:</b>		
Quotation provided:- _____	Date of quotation:- _____	
	<b>Subtotal</b>	
20% discount for orders of more than one license. If applicable, calculate discount here:-		
	<b>Total (excl VAT*)</b>	

*Subscription license is valid for 12 months from the previous expiry date.*

*\* VAT should be added if applicable*

<b>Level of access</b>	
We require the same level of access as previously:	<p style="text-align: center;"><b>YES / NO</b> (Please also tick level of access above)</p>

<b>Contact Details</b>			
Name:		Position:	
Department:			
Organisation:			
Address:			
Post Code:		Telephone no.:	
Email address:	<p style="color: red; font-size: small;">IMPORTANT – needed for password access updates; please ensure writing is legible. For shared accounts we recommend providing either a group email address or more than one work-personal address.</p>		
A copy of the invoice will be sent to you automatically. If you would also like the invoice to be sent to another address, please tick here (and complete the address details below):			
<p style="background-color: #d4edda; padding: 5px;">I confirm that the above information is correct. We agree to use the site within the terms and conditions stated on the website.</p>			
Date:		Signature:	

<b>Order number</b>	
If your organisation requires an order number to be included on the invoice before invoices can be paid, please indicate your order number here:	

*(Please note that we will not chase up order numbers which are not provided, and this may delay provision of your access, or result in your order being returned to you).*

Please go to page 3...

**Please note: if this section is not completed, invoices will only be sent to the address above.**

Invoice address			
Name:		Position:	
Department:			
Organisation:			
Address:			
Post Code:		Telephone no.:	
Email address:			

**Please send your completed form to: [NEWT.Guidelines@wales.nhs.uk](mailto:NEWT.Guidelines@wales.nhs.uk)  
For methods of payment, please see "Subscription and re-subscription" on the website.**