

## Information about patient injury cases in the private health service

All enterprises that provide health care services outside the public health service must pay contributions to NPE, to cover compensation for patient injuries (pursuant to the Health Personnel Act and the Patient Injury Act).

We have received a claim for compensation that relates to the treatment a patient has received from you. It is important for us to link the correct name and enterprise to the compensation case. We therefore ask you that you fill out this form with the correct information.

### Information about relevant practitioners/health personnel

**Practitioner 1**  
Name:

Category of healthcare  
personell:

Specialisation:

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**Practitioner 2**  
Name:

Category of healthcare  
personell::

Specialisation:

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If there are several relevant practitioners or you need more space, you can write this in the field on page 2.

### Information about the enterprise

Is the enterprise registered with NPE? Yes: No:

Name of enterprise:

Organisation number:

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Do you have an agreement with the public sector in the case in question ?

No:

Percent: \_\_\_\_\_

### Any previous name and/or organisation number

If the organisation was registered under a different name and/or organisation number at the time of the treatment concerned, you must state this here.

Name of enterprise at the time of treatment:

Organisation number:

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**Postal address:**

Postboks 232 Skøyen  
0213 Oslo

**Visiting address:**

Middelthuns gate 29  
0368 Oslo

**Telephone:** 22 99 45 00

**E-mail:** [npepost@npe.no](mailto:npepost@npe.no)

**Website:** npe.no

**Organisation number:**

984 936 923

Box for additional information

**Postadresse:**  
Postboks 232 Skøyen  
0213 Oslo

**Besøksadresse:**  
Middelthuns gate 29  
0368 Oslo

**Telefon:** 22 99 45 00  
**E-post:** [npepost@npe.no](mailto:npepost@npe.no)  
**Internett:** npe.no

**Organisasjonsnummer:**  
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