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Mr.
Nazar Semenjuk

your case-manager:

COST - ESTIMATION

Dear Mr. Semenjuk

please find below a cost estimate for the proposed plan of treatment

in the department of Surgery
clinical director: Professor
treatment category non private
treatment type 18 days in-patient
accommodation:
accompanying person: yes, in the room of the patient

diagnose: Klippel-Trenaunay-Weber-Syndrome
Proposed treatment: Coiling, partresection of colon

Treatment flat rate I

Services for diagnostic work-up, surgery, ultra-sound and therapy
including inpatient, outpatient care, risk surcharge, room charges

17.737,59 €

Treatment flat rate II

Fees for physicians (clinical directors) entitled to bill independently

0,00 €

Treatment flat rate III

invoices from third parties (medical systems, special medication and so on)

0,00 €

Total costs

17.737,59 €

Before admittance to the hospital you have to make a pre-payment:

'==> if you pay by cheque or money transfer you have to pay:

17.737,59 €

==> if you pay by credit card you have to pay:

18.269,72 €

(the bank gets additional fees if you use a credit card)

The form 'request for payment' includes all financial data you need for a bank transfer.

Pls. use the attached form "request for payment" for the bank transaction! Thank you!

We must call your attention to the fact that this cost estimate relies on currently available information regarding the therapy needed. The expected length of inpatient stay follows customary calculations.

Any extensions in the length of an inpatient stay or further treatment may entail additional costs.

Treatment flat rate I is based on the German DRG-price catalogue (DRG-diagnosis related groups) for inpatient treatment or on the German GOÄ-price catalogue for outpatient treatment.

Treatment flat rate II is based on the German GOÄ-price catalogue (DRG-diagnosis related groups) physicians' scale of charges and fees.

Treatment flat rate III is based on German price catalogues for medical products, pharmacy so forth.

Pls. keep in mind that treatment will not be started without having clarified payment of this cost calculation!

Please return the signed form with the copy of the money transfer to the fax 0049 40 42803 1691.

For visa pls. Send us your passport copies and we apply for it in the German Embassy!

If you have questions do not hesitate to contact us anytime!

Thank you very much for your patience and your support!

Leonore Boscher

Managing Director - International Office - UKE