

# EMSEY HOSPITAL

## PROFORMA INVOICE

12/05/2022

TREATMENT LOCATION: EMSEY HOSPITAL  
DEPARTMENT: HEMATOLOGY DEPARTMENT

Please find below the estimated cost and details of the treatment;

ESTIMATED TREATMENT PLAN	
PATIENT'S NAME/AGE/GENDER	COSTEA ŞTETAN MATEI / 4 / M
TREATMENT PACKAGE	
<ul style="list-style-type: none"><li>Hematology Examination – 5 Times</li><li>Blood Test – 10 Times</li><li>Peripheral Smear – 10 Times</li><li>4 Session Supportive Therapy</li><li>30 Days Hotel</li></ul>	
<i>* Immunoglobulin Treatment may be needed throughout the supportive therapy. Price of 1 Session of Immunoglobulin Treatment is 3.300 USD</i>	
ESTIMATED COST:	17.500 \$
<b><u>The package does not include;</u></b> <ul style="list-style-type: none"><li>✓ Charges for inpatient stays in excess of indicated days of hospital stays</li><li>✓ Medications and treatment for pre-existing or non-procedure related conditions</li><li>✓ Personal expenses such as phone calls, room services etc.</li><li>✓ Take home medications and supplies</li><li>✓ Agreed hospital rates will be applied for additional services or items not included in the package</li></ul>	
<b><u>Additional information regarding the treatment;</u></b> <ul style="list-style-type: none"><li>✓ Provided that no complication developed, the patient will be fit to fly <b>immediately</b> after discharge</li><li>✓ Payment Policy: %100 of the package cost has to be deposited before the surgery or else the treatment will not commence.</li><li>✓ This costing is an indicative estimate and based on the study of the reports of the patient. It does not include cost of high value drugs (if needed) – the actual billing will depend on the in-person examination of the patient by the doctor. The costing and stay estimates may vary due to unforeseen complications and/or the need to administer high value drugs. Anything beyond the package stay will be charged extra and as per the actual.</li><li>✓ All patients are advised to carry, all original and latest medical reports including scans / x-rays / investigation reports (in paper or electronic format) along with the clinical opinion and estimates provided by Emsey Hospital to ensure that complete medical information is available to the service provider on their arrival in Turkey.</li></ul>	

NAME OF BANK	TURKIYE HALK BANKASI A.S.	
EMSEY HOSPITAL'S ACCOUNT NAME	EMSEY SAĞLIK HİZMETLERİ VE İŞLETMELERİ TURİZM OTELCİLİK TİCARET A.Ş.	
BRANCH CODE	1282	
SWIFT CODE	TRHBTR2A	
CURRENCY	ACCOUNT NUMBER	IBAN (International Bank Account Number)
TURKISH LIRA	10100129	TR210001200128200010100129

# EMSEY HOSPITAL

EURO	58100117	TR790001200128200058100117
U.S. DOLLAR	53100175	TR240001200128200053100175