

IDCQ Hospitales y Sanidad, S.L.U.

Invoice number: 05100224

INTERNATIONAL DEPARTMENT

Date of the issue: 10.05.2024

Date of birth: 01.05.2018

Patient: Poslavskiy Dmytro

Medical team: Dr.Olvier, Dr.Russi

Procedure: Epilepsy surgery with intracranial electrodes

	Quantity	Price	Net
Preoperative examination	1	577,50 €	577,50 €
Stage 1 surgery, invasive epilepsy neuromonitoring (SEEG), including:	1	15.176,70 €	15.176,70 €
Hospitalization (intensive care ward)	-	-	-
Hospitalization	-	-	-
Anesthetics	-	-	-
Operating room	-	-	-
Blood bank	-	-	-
Radiology	-	-	-
Medicines in intensive care	-	-	-
Medicines on the floor	-	-	-
Medicines in the operating room	-	-	-
Materials on the floor	-	-	-
Orthopedic materials	-	-	-
Material in intensive care	-	-	-
Accommodation for an accompanying person	-	-	-
Fees for doctors, surgeons, Video-EEG team	-	-	-
Scanner (3D O-arm computer assisted)	1	953,40 €	953,40 €
Infusion pump	1	299,25 €	299,25 €
Material for osteosynthesis	1	504,00 €	504,00 €
Meals for accompanying person	10	52,50 €	525,00 €
Fees of doctors, surgeons, Video-EEG team, including:	1	34.692,00 €	34.692,00 €
Electrodes for invasive recording of bioelectrical activity of the brain	-	-	-
Materials for Video-EEG	-	-	-
Anesthesiologists' fees for surgery	1	3.245,55 €	3.245,55 €
TOTAL:			55.973,40 €

The account is valid until 01.01.2025

The cost indicated in this estimate is approximate and corresponds to the price for a standard package of services provided by the hospital for this type of procedure. However, this amount is subject to change depending on the evolution of the patient's condition and/or the need to change the type of treatment, or the use of other medical services not originally envisaged, such as blood transfusion, administration of medications, an increase in the length of stay in the intensive care unit or in the hospital. department, as well as any other type of service, treatment or surgery that the patient may require.

The estimate does not include additional examinations that may be required (except those specified in the request for a quote), as well as material for prostheses and implants, if necessary.

Consent to medical treatment by the patient or his relatives, or his representative, in the event that the patient is not legally capable, imposes an obligation to pay all amounts indicated on the invoice corresponding to the cost indicated in the estimate and additional costs that may arise from the above reasons.

Before starting medical care (treatment/surgical intervention/hospitalization/sanitary procedures), the patient must deposit the amount corresponding to EUR 55.973,40 € as a deposit against the costs that may arise during the provision of medical services.

In case of agreement with the estimate and terms of payment, hand over the document signed:

Patient or his legal representative (signature and passport number)



INTERNACIONAL DEPARTMENT

When paying by bank transfer, we ask you to make a money transfer to the bank account of the Teknon Medical Center.

When translating, please indicate the patient's first and last name

Bank details:	Fiscal data:
Bank: Banco Santander S.A Address: Paseo de la Castellana 144 Madrid Swift: BSCHESMMXXX IBAN: ES2500491804172510438936	IDCQ Hospitales y Sanidad, S. L. U. Calle Zurbaran, num. 28 28010 Madrid NIF: B-87324844

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