

**Subject: Confirmation of the Hospitalisation of Patient ALEKSANDIR DOBRINOV UZUNOV**

Dear Sir/Madam,

20.07.2024

ESTIMATED TREATMENT LOCATION: ACIBADEM ALTUNIZADE HOSPITAL / ISTANBUL

PHYSICIAN: Prof. Dr. Memet Özek

The approximate estimate of costs for treatment &amp; stay in our hospital are as follows:

ESTIMATED TREATMENT REPORT	
<b>Patient's Name</b>	<b>ALEKSANDIR DOBRINOV UZUNOV</b>
<b>Physician</b>	Prof. Dr. Memet Özek
<b>Treatment Proposed</b>	Examination 300 EUR MRI brain with anestezi 1.250 EUR
<b>Note:</b> Treatment plan can be changed due to patients physical condition and we will inform you with medical report, plan will be determined after consultations and further examinations.	
<b>Total</b>	<b>1.550 EUR</b>

This estimate is for the recommended investigations.

The mentioned price might vary according to the individual diagnosis and any existing medical complications as well as any additional or special services by the senior doctors.

Also the EUR pice may vary acc. to convertible rate of EUR/TL.

PLEASE CONFIRM THE ACCEPTANCE AND PAYMENT.

**ACCOUNT DATAS ACIBADEM ALTUNIZADE HOSPITAL:**

(PLEASE SEND THE SWIFT MESSAGE TO BELOW GIVEN E-MAIL ADDRESS)

ACIBADEM SAGLIK HIZMETLERI VE TIC. A.S.

GARANTI BANKASI KOZYATAGI KURUMSAL ŞUBESI

383 -9094750

TR29 0006 2000 3830 0009 0947 50

SWIFT CODE:TGBATRISXXX

**FOR CONFIRMATION AND CONTACT:****Canan Avcı****Tel. : +90 549 812 33 01**[dzhanan.avdzha@acibadem.com](mailto:dzhanan.avdzha@acibadem.com)[www.acibademinternational.com](http://www.acibademinternational.com)