

Subject: Confirmation of the Hospitalisation of Patient Martin Miroslavov Hristov

Dear Sir/Madam,

25.10.2023

ESTIMATED TREATMENT LOCATION: ACIBADEM ALTUNIZADE HOSPITAL / ISTANBUL

PHYSICIAN: Prof. Dr. Memet Özek

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

| ESTIMATED TREATMENT REPORT | | |
|---|----------------------------------|------------------|
| Patient's Name | Martin Miroslavov Hristov | |
| Physician | Prof. Dr. Memet Özek | |
| Treatment Proposed | Port insertion | 8.587 EUR |
| | Full spinal MRI + anesthesia | 2.450 EUR |
| Not: | Avans | 7.755 EUR |
| Note: 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. | | |
| Total | | 3.290 EUR |

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 price 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 SAĞLIK HİZMETLERİ VE TİC. A.Ş.

GARANTI BANKASI KOZYATAGI KURUMSAL ŞUBESİ

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