

To Mr and Mrs Lisunova

Stephanie Rich, MBA
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Prof. Dr. Dr. Tatagiba

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**Regard: Proposal for treatment of
Lisunova, Alena * 29.06.2008**

Internationaler Patienten Service
Elke Fischer
Hilke Matthaei
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Treatment/ Question: Inpatient stay shuntoperation / endoscopy
DRG B02C

Dear Mr and Mrs Lisunova,

Datum: 24.3.2016

Thank you very much for your interest in the treatment of the above mentioned child. We believe that the treatment of the child will be possible in our institution. After consultation with Prof. Schuhmann we are pleased to offer you the following proposal for the possible treatment at the University Children's Hospital Tübingen, Germany. All calculations are based on the German Diagnosis Related Group (DRG) system and the medical fee directory (GOÄ)

Item	Description	cost per unit	Count	Amount
1.	inpatient stay shuntoperation/ endoscopy DRG B02C	14.500 €	1	14.500 €
2.	PKMS-Points	5.200 €	1	5.200 €
3.	Housing one parent during inpatient stay	101 €	14	1.414 €
4.	Private fee	14.500 €	1	14.500 €
	Translator	1.000 €	1	1.000 €
5.	Administration fee	250 €	1	250 €
Total costs				36.864 €

The proposal is based on the actual information given. If there might be major differences in the diagnostic results or severe infections (fungal, bacterial, viral) a recalculation would be necessary. If the total treatment fee after completion of the treatment will be lower than expected a refund of money will be carried out (currently we need for the process approx. 10 weeks). The proposal does not include any airport transfer or housing outside of the hospital.

If you accept this estimate and determine for the treatment we politely indicate that we would like to discuss the treatment period in advance. After that the payment may occur.

Accommodation in a single room may not be guaranteed.

We expect your response within 15 days if you have decided for the treatment in our Hospital.

Contact

Mrs. E. Fischer / Hilke Matthaei

Tel. +49- 7071-29-84 515

Info.kinderklinik@med.uni-tuebingen.de

For scheduling the total treatment fee has to be paid in advance on the following account:

Bank address : Kreissparkasse Tübingen, Am Lustnauer Tor 3, 72074 Tübingen, Germany

Account holder: University Hospital Tübingen

Account number: 14144

Bank Code No.: 64150020

Swift-Code: SOLADES1TUB

IBAN: DE79641500200000014144

Please specify: KIKLI Lisunova Alena

If you have any questions regarding the proposal please feel free to contact us at any time.

With best regards,



Stephanie Rich, MBA
Executive Director Hospital