



**HADASSAH
UNIVERSITY
MEDICAL
CENTER**

Founded by Hadassah, the Women's Zionist Organization of America

Hadassah University Hospital
Department of Patient Administration
Private Consultation Service

Date of Issue : 02/02/2020
Print Date : 02/02/2020
Reference : 124762
Record Number : z-002670664

To:
First Name : ASEL
Last Name : GATAULLINA
Record Number : z-002670664
Passport Number: 1837
Address :
RUSSIA



This is to certify that the patient listed above is in need of medical services costing 61020.00 NIS, the equivalent of 17646.04 US Dollars.

SERVICE CODE	SERVICE NAME	DOCTOR NAME	AMT	UNIT COST	US\$ COST	TOTAL
=====	=====	=====	=====	=====	=====	=====
997621	T.EXPANDERS X2	PROF. MARGULIS A	1	24021.00	6946.50	24021.00
140203	INSERTIOM OF SK		1	36999.00	10699.54	36999.00

(Including up to 4 days of hospitalization)

This quote is valid only if stamped with an original Hadassah seal and signed by an International Patient Department representative.

According to Israeli law, cash payment is limited to price offers that do not exceed 55,000 NIS or the equivalent in foreign currency on the day of payment.

1. This quote is not final and is dependent upon the procedure that is performed, and/or the actual number of hospitalization days.

The final price will be determined in accordance with the actual procedure that is performed. This quote is valid for 90 days.

Additional costs may be incurred for additional testing and/or procedures that may arise throughout the anticipated medical care. Costs for additional testing and/or procedures will be charged based on Hadassah's rate at the time of the care.

2. Please note the following:

Experience
the new
Hadassah

Ein Kerem
P.O.B. 12000, Jerusalem 912001, Israel
Mount Scopus (Har Hatzofim)
P.O.B. 24035, Jerusalem 9124001, Israel
www.hadassah.org.il
Hadassah Medical Organization (PBC)



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Department of Patient Administration**

- A. You must bring your passport with you.
 - B. Additional hospitalization days will be charged at the rate of 1886.35 USD per day.
 - C. Any days requiring hospitalization in the ICU (intensive care unit) will be charged, in addition to the charge in section B, at the rate of 3285.14 USD per day.
 - D. If the patient is a minor, or unable to make decisions for himself, a parent or legal guardian must be present.
3. Payment:
- A. A deposit of 17646.04 USD is required, prior to the initial assessment.
 - B. For your convenience, a bank transfer can be made to the Hadassah Medical Organization account. Please keep in mind that it takes approximately 3 working days to credit the Hospital's account.
 - C. In such cases, payment should be made payable to:
Hadassah Medical Organization - Swift Code POALILITXXX
BANK HAPOALIM, Har Hotzvim #436, 1 Hamarpe St.,
JERUSALEM Israel,
IBAN CODE: IL410124360000000025000
Account number: 25000.
Please fax a copy of your bank transfer to fax #972-2-6776600.
4. Accommodations:
- A. Hadassah does not provide accommodations to any person(s) accompanying the patient during hospitalization.
 - B. Accommodation for the patient or for the accompanying person(s) prior to or following hospitalization is the responsibility of the patient.
 - C. Accommodations at the Ein Kerem Hotel on campus can be arranged.
 - D. Bookings can be made via email at: info@einkeremhotel.co.il or by phone: 972-2-5608555.
 - E. Hotel charges are not included in the aforementioned medical charges.
- We encourage you to contact us if you require any additional information or assistance via the internet at: INTERNATIONAL@hadassah.org.il or by phone: 972-2-6779111.

Sincerely,
Hadassah University Hospital

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Department of Patient Administration
Clerk: POPOVSKY LUBOV Hadassah University Medical Center



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Private Consultation Service

Date of Issue : 02/02/2020
Print Date : 02/02/2020
Reference : 124764
Record Number : z-002670664

To:
First Name : ASEL
Last Name : GATAULLINA
Record Number : z-002670664
Passport Number: 1837
Address :
RUSSIA



This is to certify that the patient listed above is in need of medical services costing 10512.00 NIS, the equivalent of 3039.91 US Dollars.

SERVICE CODE	SERVICE NAME	DOCTOR NAME	AMT	UNIT COST	US\$ COST	TOTAL
=====	=====	=====	=====	=====	=====	=====
136	PLASTIC CLINIC		12	435.00	125.80	5220.00
40503	INFLATION OF ER		12	441.00	127.53	5292.00

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- B. Additional hospitalization days will be charged at the rate of 1886.35 USD per day.
- C. Any days requiring hospitalization in the ICU (intensive care unit) will be charged, in addition to the charge in section B, at the rate of 3285.14 USD per day.
- D. If the patient is a minor, or unable to make decisions for himself, a parent or legal guardian must be present.
- 3. Payment:**
- A. A deposit of 3039.91 USD is required, prior to the initial assessment.
- B. For your convenience, a bank transfer can be made to the Hadassah Medical Organization account. Please keep in mind that it takes approximately 3 working days to credit the Hospital's account.
- C. In such cases, payment should be made payable to:
Hadassah Medical Organization - Swift Code POALILITXXX
BANK HAPOLIM, Har Hotzvim #436, 1 Hamarpe St.,
JERUSALEM Israel,
IBAN CODE: IL410124360000000025000
Account number: 25000.
Please fax a copy of your bank transfer to fax #972-2-6776600.
- 4. Accommodations:**
- A. Hadassah does not provide accommodations to any person(s) accompanying the patient during hospitalization.
- B. Accommodation for the patient or for the accompanying person(s) prior to or following hospitalization is the responsibility of the patient.
- C. Accommodations at the Ein Kerem Hotel on campus can be arranged.
- D. Bookings can be made via email at: info@einkeremhotel.co.il or by phone: 972-2-5608555.
- E. Hotel charges are not included in the aforementioned medical charges.
- We encourage you to contact us if you require any additional information or assistance via the internet at: INTERNATIONAL@hadassah.org.il or by phone: 972-2-6779111.

Sincerely,
Hadassah University Hospital
Department of Patient Administration

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Date of Issue : 02/02/2020
Print Date : 02/02/2020
Reference : 124765
Record Number : z-002670664

To:
First Name : ASEL
Last Name : GATAULLINA
Record Number : z-002670664
Passport Number: 1837
Address :
RUSSIA



This is to certify that the patient listed above is in need of medical services costing 58904.00 NIS, the equivalent of 17034.12 US Dollars.

SERVICE CODE	SERVICE NAME	DOCTOR NAME	AMT	UNIT COST	US\$ COST	TOTAL
97139	TISSUE EXPAND.2	PROF. MARGULIS A	1	24021.00	6946.50	24021.00
996476	EXCISION OF LE	PROF. MARGULIS A	1	14628.00	4230.19	7314.00
				[AFTER QUANTITY DISCOUNT]		
999000	Package Hospita		1	27569.00	7972.53	27569.00

(Including up to 3 days of hospitalization)

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2. Please note the following:

- A. **You must bring your passport with you.**
- B. Additional hospitalization days will be charged at the rate of 1886.35 USD per day.
- C. Any days requiring hospitalization in the ICU (intensive care unit) will be charged, in addition to the charge in section B, at the rate of 3285.14 USD per day.
- D. If the patient is a minor, or unable to make decisions for himself, a parent or legal guardian must be present.

3. Payment:

- A. A deposit of 17034.12 USD is required, prior to the initial assessment.
- B. For your convenience, a bank transfer can be made to the Hadassah Medical Organization account. Please keep in mind that it takes approximately 3 working days to credit the Hospital's account.
- C. In such cases, payment should be made payable to:
Hadassah Medical Organization - Swift Code POALILITXXX
BANK HAPOLIM, Har Hotzvim #436, 1 Hamarpe St.,
JERUSALEM Israel,
IBAN CODE: IL410124360000000025000
Account number: 25000.
Please fax a copy of your bank transfer to fax #972-2-6776600.

4. Accommodations:

- A. Hadassah does not provide accommodations to any person(s) accompanying the patient during hospitalization.
- B. Accommodation for the patient or for the accompanying person(s) prior to or following hospitalization is the responsibility of the patient.
- C. Accommodations at the Ein Kerem Hotel on campus can be arranged.
- D. Bookings can be made via email at: info@einkeremhotel.co.il or by phone: 972-2-5608555.
- E. Hotel charges are not included in the aforementioned medical charges.

We encourage you to contact us if you require any additional information or assistance via the internet at: INTERNATIONAL@hadassah.org.il or by phone: 972-2-6779111.

Sincerely,

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Date of Issue : 02/02/2020
Print Date : 02/02/2020
Reference : 124766
Record Number : z-002670664

To:
First Name : ASEL
Last Name : GATAULLINA
Record Number : z-002670664
Passport Number: 1837
Address :
RUSSIA



This is to certify that the patient listed above is in need of medical services costing 3552.00 NIS, the equivalent of 1027.18 US Dollars.

SERVICE CODE	SERVICE NAME	DOCTOR NAME	AMT	UNIT COST	US\$ COST	TOTAL
=====	=====	=====	=====	=====	=====	=====
40021	REMOVAL OF STIT		1	75.00	21.69	75.00
23008	SEDATION		1	2190.00	633.31	2190.00
666	CLI TOURIST		1	1287.00	372.18	1287.00

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- A. You must bring your passport with you.
- B. Additional hospitalization days will be charged at the rate of 1886.35 USD per day.
- C. Any days requiring hospitalization in the ICU (intensive care unit) will be charged, in addition to the charge in section B, at the rate of 3285.14 USD per day.
- D. If the patient is a minor, or unable to make decisions for himself, a parent or legal guardian must be present.
3. Payment:
- A. A deposit of 1027.18 USD is required, prior to the initial assessment.
- B. For your convenience, a bank transfer can be made to the Hadassah Medical Organization account. Please keep in mind that it takes approximately 3 working days to credit the Hospital's account.
- C. In such cases, payment should be made payable to:
Hadassah Medical Organization - Swift Code POALILITXXX
BANK HAPOLIM, Har Hotzvim #436, 1 Hamarpe St.,
JERUSALEM Israel,
IBAN CODE: IL410124360000000025000
Account number: 25000.
Please fax a copy of your bank transfer to fax #972-2-6776600.
4. Accommodations:
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- B. Accommodation for the patient or for the accompanying person(s) prior to or following hospitalization is the responsibility of the patient.
- C. Accommodations at the Ein Kerem Hotel on campus can be arranged.
- D. Bookings can be made via email at: info@einkeremhotel.co.il or by phone: 972-2-5608555.
- E. Hotel charges are not included in the aforementioned medical charges.
- We encourage you to contact us if you require any additional information or assistance via the internet at: INTERNATIONAL@hadassah.org.il or by phone: 972-2-6779111.

Sincerely,
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Clerk: POPOVSKY LUBOV



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Department of Patient Administration
Private Consultation Service

Date of Issue : 01/06/2020
Print Date : 01/06/2020
Reference : 126822
Record Number : z-002670664

To:
First Name : ASEL
Last Name : GATAULLINA
Record Number : z-002670664
Passport Number: 1837
Address :
RUSSIA

This is to certify that the patient listed above is in need of medical services costing 17159.00 NIS, the equivalent of 4899.77 US Dollars.

SERVICE CODE	SERVICE NAME	DOCTOR NAME	AMT	UNIT COST	US\$ COST	TOTAL
=====	=====	=====	=====	=====	=====	=====
999343	LODGING		3	4903.00	1400.06	14709.00
999343	LODGING		14	175.00	49.97	2450.00

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2. Please note the following:
A. You must bring your passport with you.

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Hadassah University Hospital Department of Patient Administration

- B. Additional hospitalization days will be charged at the rate of 1861.79 USD per day.
- C. Any days requiring hospitalization in the ICU (intensive care unit) will be charged, in addition to the charge in section B, at the rate of 3242.15 USD per day.
- D. If the patient is a minor, or unable to make decisions for himself, a parent or legal guardian must be present.

3. Payment:

- A. A deposit of 4899.77 USD is required, prior to the initial assessment.
- B. For your convenience, a bank transfer can be made to the Hadassah Medical Organization account. Please keep in mind that it takes approximately 3 working days to credit the Hospital's account.
- C. In such cases, payment should be made payable to:
Hadassah Medical Organization - Swift Code POALILITXXX
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JERUSALEM Israel,
IBAN CODE: IL410124360000000025000
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4. Accommodations:

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Clerk: NIAZOV NAAMA

Hadassah University Medical Center



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