



ISTANBUL

FLORENCE NIGHTINGALE
HASTANESİ

INFORMATION SHEET

Date: 12.06.2018

Patient: Ivilina Dimova

Thank you for choosing Group Florence Nightingale Hospitals for your healthcare needs. We will be pleased to assist you during your visit to Group Florence Nightingale Hospitals and ensure that you receive the highest level of care at all times. Vital information and hospital policies for your requested medical services are outlined below.

Appointment Information

1. Our team can assist with transportation and accommodation arrangements. Our transportation services from and to the airport are free-of-charge for our patients. We also have special rates for patients of Group Florence Nightingale Hospitals at nearby hotels. Please let us know ahead of time for any assistance requirements.
2. The signed copy of this payment information sheet form should be returned to our office in order to confirm the appointment(s).
3. Bring copies of your passport, medical records (accepted in English or Turkish only) and any relevant image diagnostics to the appointment.
4. Please arrive at the hospital 1 hour prior to your appointment time to complete the necessary registration process.
5. Notice of appointment cancellations must be provided at least 2 days prior to the appointment date or 4 days prior to a surgery or admission date.

Financial Information

1. Payment(s) for medical services must be issued beforehand i.e. by admission date/time of first appointment.
2. The half of the inpatient treatment costs must be paid before the arrival to the hospital via bank transaction
3. Transaction with electronic bank wire is expected in advance.
4. Directions on how to deposit funds are included on the next page. Expenses for medical services rendered will be checked at regular intervals during treatment, care and/or recovery to verify if any extra costs occur beyond the given estimations; patients will be informed accordingly and asked to settle dues.



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HASTANESİ**PROFORMA INVOICE****Appointment Itinerary & Estimated Treatment Costs**

Visit Type	Department	Doctor	Procedure	Estimated Treatment Costs
Outpatient Treatment	Neurology Department	Prof. Dr. Barış Topçular	Consultation, blood tests, genetic tests, MRI, lumbar puncture and cell culture investigation, stem cell treatment	24.000 USD

- The package does not include any unforeseen complications.
- In case of using extra medication, and/or medical equipment, any additional interventional procedures, tests and/or surgeries, additional costs will be charged.
- In case of extended hospitalization, additional costs will be charged. (550 USD/day ward fee per day – excluding medication and medical treatment)

Bank Account Details

GARANTİ BANKASI MECDİDİYEKOY TICARI SUBESİ – Currency USD

Account Name	İSTANBUL FLORENCE NIGHTINGALE HASTANESİ A.Ş
IBAN	TR48 0006 2000 1190 0009 0818 57
SWIFT	TGBATRISXXX

GARANTİ BANKASI MECDİDİYEKOY TICARI SUBESİ – Currency EUR

Account Name	İSTANBUL FLORENCE NIGHTINGALE HASTANESİ A.Ş
IBAN	TR75 0006 2000 1190 0009 0818 56
SWIFT	TGBATRISXXX

I,....., hereby with certify that I perfectly understand and abide to Group Florence Nightingale Hospitals' treatment planning and service policies, and guarantee to make the payments according to Group Florence Nightingale Hospitals' payment procedures.

Name, Surname:**Signature:**

Op. Dr. C. Ata. BOZOKLAR
Genel Cerrahi Uzmanı
Diploma No: 7067
Diploma Tescil No: 45479

Date:**Group Florence Nightingale Hospital:**