 Hôpitaux de Toulouse Department of Finance (D.A.F.)	PRELIMINARY ESTIMATE OF HOSPITALIZATION FEES TRANSPLANT KIDNEY - PANCREAS (DEVIS PREVISIONNEL POUR FRAIS D'HOSPITALISATION)	Version 1
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I the undersigned, SOUCHON Brigitte, member of the Department of Finance of the C.H.U. of TOULOUSE certify that the patient:

Mr. Mrs Miss (Surname, Name, Maiden Name): KENANOVA Dilyana Lyubenova

Place of birth: 27/03/1981

Phone Number :

Complete address: SUHATA REKA DISTRICT, BL.18, ENT.G, FL.10, APP.136
SOFIA 1517 - BULGARIA

is asking for an hospitalization (TRANSPLANT KIDNEY-PANCREAS) in the service of NEPHROLY run by Professor ROSTAING in the Hospital of RANGUEIL / CHU of Toulouse.

The daily rate ("prix de journée") set by an order of the Regional Agency of Health of Midi Pyrénées from 01/07 /2012 is 4309 € in intensive care, 2936 € in continuous care, 1624 € in Nephrology.

The daily price ("forfait journalier") set by an order of the Ministry of Health from 01/01 /2010 is 18 €

The preliminary estimate of hospitalization fees adds up to:

	Rate	Number of days	Total amount in €
Stay in intensive care	4421	2	8842
Stay in continuous care	2936	5	14680
Stay in Nephrology	1624	11	17864
Daily price	18	19	342
On day clinic	1145	3	3435
Private room	49	3	147
Provision of 20 % on the stay in hospital			9062
PRELIMINARY ESTIMATE OF HOSPITALIZATION FEES TO BE PAID			54372 €

The preliminary estimate is based on 19 day(s) of hospitalization and is subjected to changes of rate and to medical elements. The total amount of this preliminary estimate is not restrictive.

This preliminary estimate is delivered in duplicate to obtain the administrative authorizations to transfer the funds and to get the visa for medical care.

If Professor ROSTAING decides that the hospitalization must be extended, the supplementary fees will be charged in addition of the preliminary estimate with all other medical cares delivered out of the hospitalization (oupatients'cares for example).

Before any confirmation of the date of the hospitalization, the preliminary estimate must be totally paid on the following account belonging to the Paymaster of the CHU of Toulouse and opened at the Bank of France :

Account number C311000000 91
code guichet 00833
code Banque 30001
IBAN FR75 3000 1008 33C3 1100 0000 091
BIC : BDFEFRPPCCT

If the payment is made by anyone else but the patient, please fulfil the last part of the document.

A copy duly signed by the person who pays the preliminary estimate must be returned to the CHU of Toulouse and must contain particulars of his bank (or post) account in case of repayment.

At the end of the stay in the hospital, the CHU of Toulouse will make out a bill. If the total amount of the preliminary estimate is higher than the total amount of the final bill, the over-payment will be paid back on the basis of the particulars of the bank (or post) account returned with the preliminary estimate.

Informations to give by the person who pays the preliminary estimate on behalf of the patient	
Link with the patient :	
<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss	Surname
Name:	
Date of birth : / /	<u>Complete address</u> :
.....	
Phone Number :	
Particulars of the bank (or post) account	<input type="checkbox"/>
Copy of identity papers (passport)	<input type="checkbox"/>

Toulouse, the 29/11/2012

On the authority of the Finance Director
of the CHU of Toulouse
Brigitte SOUCHON



Preliminary estimate agreed in Toulouse
on the 20...

Name of the patient :

Signature :

Name and signature of the person who pays
the preliminary estimate on behalf of the
patient :

GENERAL CONDITIONS

Any hospitalisation requires a visa for medical treatment from French Embassy or Consulate of country of origin

Amount of hospitalisation costs includes

For the duration of stay (s) :

Hosting	Food
Investigation procedures	Operating room charges
Laboratory procedures	Blood products
Radiological procedures	Practitioners fees
Surgical procedures	Cost of medical and paramedical staff
Pharmaceutical products	Daily (hospitalisation) rate

Amount of hospitalisation costs does not include

Supply of pharmaceutical products prescribed at the end of the stay (s)	Transportation costs
Preoperative consultations	Repatriation charges
Post-operative follow-up consultations and hospitalisations	Telephone
Procedures and stays not falling under the pathology behind the estimate	Television
Hosting in centres outside care units in the hospital	Costs of family
	Private room
	Miscellaneous charges excluding hospital services
	Fees as part of the practitioner's liberal activity

Pricing

The estimate is based on tariffs prevailing at the date of the request, it has to be reassessed the day of hospitalisation

Definitive bill is calculated on the basis of tariffs in effect during the hospitalisation stay.

The payment of the provision must be made under the supervision of one paying party, any potential surplus will be returned given the bank details provided

Some advice

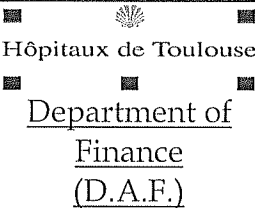
Check :

The validity of your passport
The duration of your visa
Validity conditions of your return ticket

Plan :

A sufficient reserve of money to meet your individual needs

*For further information, you can contact at the hospital
the agent of SGAP (Service of Administrative Management of Patients) in charge of foreign nationals
Brigitte SOUCHON :Téléphone 33 5 61 32 22 21 et Fax 33 5 61 32 21 61*

 <p>Hôpitaux de Toulouse Department of Finance (D.A.F.)</p>	<p>PRELIMINARY ESTIMATE OF HOSPITALIZATION FEES TRANSPLANT KIDNEY AND PANCREAS WORK UP (DEVIS PREVISIONNEL POUR FRAIS D'HOSPITALISATION)</p>	<p>Version 1</p>
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I the undersigned, **SOUCHON Brigitte**, member of the Department of Finance of the C.H.U. of TOULOUSE certify that the patient:

Mr. Mrs Miss (Surname, Name, Maiden Name): **KENANOVA Dilyana Lyubenova**

Place of birth: **27/03/1981**

Complete address: **SUHATA REKA DISTRICT, BL.18, ENT.G, FL.10, APP.136
SOFIA 1517 - BULGARIA**

is asking for an hospitalization **TRANSPLANT KIDNEY AND PANCREAS WORK UP** in the service of **NEPHROLOGY** run by Professor **ROSTAING** in the Hospital of **RANGUEIL / CHU** of Toulouse.

The daily rate ("prix de journée") set by an order of the Regional Agency of Health of Midi Pyrénées from 01/07 /2012 is 1343 € in medicine, 1624 € in surgery.

The daily price ("forfait journalier") set by an order of the Ministry of Health from 01/01 /2010 is 18 €

The preliminary estimate of hospitalization fees adds up to:

	Rate	Number of days	Total amount in €
Hospitalization in NEPHROLOGY	1343	2	2686
Daily price	18	3	54
Provision of 20 % on the stay in hospital			548
PRELIMINARY ESTIMATE OF HOSPITALIZATION FEES TO BE PAID			3288 €

The preliminary estimate is based on **3 day(s) of hospitalization** and is subjected to changes of rate and to medical elements. The total amount of this preliminary estimate is **not restrictive**.

This preliminary estimate is delivered in duplicate to obtain the administrative authorizations to transfer the funds and to get the visa for medical care.

If Professor **ROSTAING** decides that the hospitalization must be extended, the supplementary fees will be charged in addition of the preliminary estimate with all other medical cares delivered out of the hospitalization (oupatients'cares for example).

Before any confirmation of the date of the hospitalization, the preliminary estimate must be totally paid on the following account belonging to the Paymaster of the CHU of Toulouse and opened at the Bank of France:

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code Banque 30001
IBAN FR75 3000 1008 33C3 1100 0000 091
BIC : BDFEFRPPCCT

If the payment is made by anyone else but the patient, please fulfil the last part of the document.

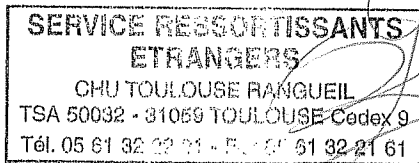
A copy duly signed by the person who pays the preliminary estimate must be returned to the CHU of Toulouse and **must** contain particulars of his bank (or post) account in case of repayment.

At the end of the stay in the hospital, the CHU of Toulouse will make out a bill. If the total amount of the preliminary estimate is higher than the total amount of the final bill, the over-payment will be paid back on the basis of the particulars of the bank (or post) account returned with the preliminary estimate.

Informations to give by the person who pays the preliminary estimate on behalf of the patient	
Link with the patient :	
<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss	Surname
Name:	
Date of birth : / /	<u>Complete address</u> :
.....	
Phone Number :	
Particulars of the bank (or post) account	<input type="checkbox"/>
Copy of identity papers (passport)	<input type="checkbox"/>

Toulouse, the 29/11/2012

On the authority of the Finance Director
of the CHU of Toulouse
Brigitte SOUCHON



Preliminary estimate agreed in Toulouse
on the 20...

Name of the patient :

Signature :

Name and signature of the person who pays
the preliminary estimate on behalf of the
patient :

GENERAL CONDITIONS

Any hospitalisation requires a visa for medical treatment from French Embassy or Consulate of country of origin

Amount of hospitalisation costs includes

For the duration of stay (s) :

Hosting	Food
Investigation procedures	Operating room charges
Laboratory procedures	Blood products
Radiological procedures	Practitioners fees
Surgical procedures	Cost of medical and paramedical staff
Pharmaceutical products	Daily (hospitalisation) rate

Amount of hospitalisation costs does not include

Supply of pharmaceutical products prescribed at the end of the stay (s)	Transportation costs
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The payment of the provision must be made under the supervision of one paying party, any potential surplus will be returned given the bank details provided

Some advice

Check :

The validity of your passport
The duration of your visa
Validity conditions of your return ticket

Plan :

A sufficient reserve of money to meet your individual needs

*For further information, you can contact at the hospital
the agent of SGAP (Service of Administrative Management of Patients) in charge of foreign nationals
Brigitte SOUCHON :Téléphone 33 5 61 32 22 21 et Fax 33 5 61 32 21 61*