

DEUTSCHES HERZZENTRUM BERLIN  
STIFTUNG DES BÜRGERLICHEN RECHTS

Deutsches Herzzentrum Berlin, Postfach 65 05 05, 13305 Berlin

Mr. and Mrs. Tsivinov

Prof. Dr. Dr. h.c. R. Hetzer (hetzer@dhzb.de)  
Herz, Thorax- und Gefäßchirurgie

Prof. Dr. E. Fleck (fleck@dhzb.de)  
Innere Medizin-Kardiologie

Prof. Dr. Dr. h.c. H. Kuppe (kuppe@dhzb.de)  
Anästhesiologie

Prof. Dr. F. Berger (berger@dhzb.de)  
Angeborene Herzfehler-Kinderkardiologie

Berlin, den 21.4.2010

Gesch. Z.: OV/lo

Durchwahl: 030/4593-2800

for information: Mrs. Rost – internal

**RE: Medical Treatment for**  
**TSIVINOV, Zakhar – born 11.02.2010**

Dear Mr. and Mrs. Tsivinov,

thank you for your inquiry of treatment of your son Zakhar. According to the medical records, which you have sent us; our physicians saw that he is suffering from a congenital heart defect and suggest that she should undergo a complex operation at the German Heart Institute Berlin.

The medical classification is solely based on the presented medical records and can be revised upon the initial medical examinations.

Should you wish to be treated by the chief surgeon or by an appointed physician under the chief surgeon's supervision the estimated costs for this procedure will be:

- complex surgery utilizing the heart-lung machine 35.440,00 €

Should you not wish to be treated by the chief surgeon the estimated costs for this procedure will be:

- complex surgery utilizing the heart-lung machine 23.630,00 €

Each sum includes a maximum of 20 days of hospitalization. Every further day will be billed in addition with 1.535,00 € for treatment by the chief surgeon/appointed physician or with 1.150,00 € for treatment under supervision of the chief physician.

Each sum includes hospitalization fees, materials, medication, intensive care, physiotherapy, echocardiography, x-ray, ecg., and laboratory examinations. Standard room accommodation is provided.

Please note, that the indicated prices are lump-sums, and that in the case of non-utilization of the mentioned maximum hospitalization period, this will not lead to a reduction of the package price.

Provided either you or your insurance company is willing to cover these expenses, we will request the sum mentioned above to be deposited in advance to the following bank account of the German Heart Institute Berlin (Deutsches Herzzentrum Berlin):

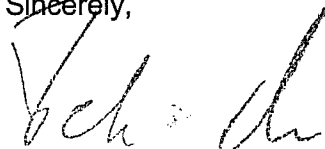
Recipient: Deutsches Herzzentrum Berlin  
Bank: Landesbank Berlin -Girozentrale-, Berlin  
Account no.: 310 008 000  
Bank Sort no.: 100 500 00  
S.W.I.F.T.: BELADEBE, IBAN: DE 42 1005 0000 0310 0080 00  
Please indicate the name of the patient.

We will arrange dates for hospital admission and operation as soon as the transfer is confirmed by our bank.

During your stay in Berlin, you as the parents may wish to stay at the Ronald McDonald Parents' House, which is not far from the hospital. This accommodation is available at no further charge. Alternatively you can stay at our own guesthouse, the Axel Springer Guest House, which is located on the hospital grounds. However, the additional guesthouse costs would need to be paid separately.

If you agree with these terms or should you have any further questions, please do not hesitate to contact Dr. Ovroutski under ++49/(0)30-4593-2834.

Sincerely,



Prof. Dr. med. F. Berger  
Head of Dept. for  
Congenital Heart Defects/  
Paediatric Cardiology

Deutsches Herzzentrum Berlin  
- Stiftung des bürgerlichen Rechts -  
Klinik für Angeborene  
Herzfehler / Kinderkardiologie  
Augustenburger Platz 1  
13353 Berlin  
Telefon: 0049-30-4593 2800  
Telefax: 0049-30-4593 2900