



901 45th Street | West Palm Beach, FL 33407  
561.844.6300 | [www.stmarysmc.com](http://www.stmarysmc.com)

**COST ESTIMATE FOR:** Kacper Makuch January 14, 2013  
**SCHEDULE SURGERY DATE:** TBD **Discount: 25%**  
**PAYOR:** Self Pay

Hospital Fees Breakdown

Hospital Charges - Room and Board	3 Night(s)	\$	4,062.33
Hospital charges - Operating Room	6 Hour(s)	\$	23,124.15
Hospital charges - Anesthesia		\$	4,900.44
Hospital charges - Recovery Room		\$	2,311.87
Equipment and Hardware		\$	8,769.21
Labs, x-rays and medications		\$	7,800.00
Inpatient Physical Therapy		\$	1,683.00
Pre-op X-rays		\$	310.00
Post- op X-rays		\$	310.00
<b>Total for Hospital Fees</b>		<b>\$</b>	<b>53,271.00</b>

Physician Fees Breakdown

Superhip	\$	37,500.00
Superknee	\$	18,750.00
Assistant Surgeon	\$	11,250.00
Post-Operative Clinic Visits (2)	\$	879.00
<b>TOTAL TFPS PHYSICIAN FEES</b>		<b>USD 68,379.00</b>

Hospital Based Physician Fees

Anesthesiologist	\$	4,500.00
Radiologist	\$	200.00
<u>Hospitalist</u>	\$	2,400.00
<b>Total for Hospital Based Physician Fees</b>	<b>\$</b>	<b>7,100.00</b>

**TOTAL ESTIMATED COST (HOSPITAL AND PHYSICIAN FEES) USD 128,750.00**

This estimate is based on information available at this time. Please be advised that hospital fees may change without notice and additional charges may not be included in this estimate; however all charges will be reflected on your final bill. Should the estimate exceed actual charges, a refund will be processed promptly. Conversely, if charges exceed the estimate the patient, parents or legal guardian assumes responsibility for all additional charges. This estimate covers only the items listed above, except for certain other incidental services such as; limited transportation services to and from the facility for treatment purposes, along with other certain incidental charges. Payment in full is expected prior to surgery. Accepted payment methods are: U.S. Bank Checks, U.S. Bank Drafts, or Direct Wire Transfers. For payment arrangements and wire transfer information, please call Ms. Ana Quiroga at 1-561-882-6218. This estimate is valid for 30 days from the date issued.

Best regards,

Ms. Ana Quiroga  
Director of Patient Admissions  
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email: [ana.quiroga@coniferhealth.com](mailto:ana.quiroga@coniferhealth.com)