



901 45th Street
561.844.6300

West Palm Beach, FL 33407
www.stmarysmc.com

COST ESTIMATE FOR: Adam Studnicki October 18, 2016
SCHEDULE SURGERY DATE: TBD **Discount: 15%**
PAYOR: Self pay

Surgery #1

Hospital Fees Breakdown

Hospital Charges - Room and Board	2 Night(s)	\$ 2,740.40
Hospital charges - Operating Room	6 Hour(s)	\$ 40,221.98
Hospital charges - Anesthesia		\$ 8,572.52
Hospital charges - Recovery Room		\$ 3,357.15
Equipment and Hardware		\$ 4,730.00
Labs, x-rays and medications		\$ 4,760.00
Inpatient Physical Therapy		\$ 1,271.60
Pre-Op x-rays		\$ 263.50
Post-Op x-rays		\$ 790.50
TOTAL HOSPITAL FEES		\$ 66,707.65

Hospital Based Physician Fees

Anesthesiologist	\$ 5,000.00
Radiologist	\$ 400.00
Hospitalist	\$ 800.00
TOTAL HOSPITAL BASED PHYSICIAN FEES	\$ 6,200.00

Physician Fees Breakdown

Left pollicization of thumb	\$ 12,515.60
Left tendon transfer of volar interosseous to thumb	\$ 5,957.28
Left tendon transfer of dorsal interosseous to thumb	\$ 5,957.28
Left tendon transfer of lumbrical to thumb	\$ 5,957.28
Left osteoplasty shortening of second metatarsal	\$ 5,111.02
Left decompression of digital nerves	\$ 2,351.51
Left 1st webspace reconstruction	\$ 4,810.12
Right ulnarization	\$ 6,572.95
Right transfer of FCU tendon	\$ 4,656.23
Right decompression of median nerve	\$ 3,250.26
Right decompression of ulnar nerve	\$ 4,541.86
Right decompression of dorsal cutaneous branch of ulnar nerve	\$ 3,030.35
Right fasciotomy of forearm	\$ 4,341.53
Right osteoplasty shortening of ulna with internal fixation	\$ 5,803.19
Right temporary arthrodesis of wrist	\$ 5,535.34
Assistant surgeon	\$ 16,078.36
Clinic visits(3)	\$ 1,377.00
TOTAL TFPS PHYSICIAN FEES	\$ 97,847.13

TOTAL ESTIMATED COST (HOSPITAL AND PHYSICIAN FEES) USD 170,754.78

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Best regards,

Mr. Craig Lawrence
 St. Mary's Medical Center
 Tel: 1-561-882-4711
 email: craig.lawrence@tenethealth.com



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TBD

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Surgery #2

Hospital Fees Breakdown

Hospital Charges - Room and Board	1 Night(s)	\$	1,370.20
Hospital charges - Operating Room	3 Hour(s)	\$	21,107.18
Hospital charges - Anesthesia		\$	4,330.44
Hospital charges - Recovery Room		\$	3,357.15
Labs, x-rays and medications		\$	2,380.00
Inpatient Physical Therapy		\$	1,271.60
Pre-Op x-rays		\$	263.50
Post-Op x-rays		\$	790.50
TOTAL HOSPITAL FEES		\$	34,870.57

Hospital Based Physician Fees

Anesthesiologist	\$	3,600.00
Radiologist	\$	200.00
Hospitalist	\$	400.00
TOTAL HOSPITAL BASED PHYSICIAN FEES	\$	4,200.00

Physician Fees Breakdown

Right pollicization of thumb	\$	12,515.60
Right tendon transfer of volar interosseous to thumb	\$	5,957.28
Right tendon transfer of dorsal interosseous to thumb	\$	5,957.28
Right tendon transfer of lumbrical to thumb	\$	5,957.28
Right osteoplasty shortening of second metatarsal	\$	5,111.02
Right decompression of digital nerves	\$	2,351.51
Right 1st webspace reconstruction	\$	4,810.12
Right removal of internal fixation from wrist	\$	3,246.05
Right removal of internal fixation from elbow	\$	3,246.05
Assistant surgeon	\$	9,830.43
Clinic visits(3)	\$	1,377.00

TOTAL TFPS PHYSICIAN FEES \$ 60,359.60

TOTAL ESTIMATED COST (HOSPITAL AND PHYSICIAN FEES) USD 99,430.17

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Physical Therapy Fees Breakdown - Following Surgery #1

Physical therapy - One hour land	5x per week	for	2	weeks	\$	2,255.00
Occupational therapy - Splinting x3					\$	900.00
TOTAL POST OP PHYSICAL THERAPY						USD 3,155.00

TOTAL ESTIMATED COST (CLINIC AND PHYSICIAN FEES FOR PT) USD 3,155.00

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Physical Therapy Fees Breakdown - Following Surgery #2

Physical therapy - One hour land	5x per week	for	6	weeks	\$	6,765.00
Occupational therapy - Splinting x2					\$	600.00
TOTAL POST OP PHYSICAL THERAPY						USD 7,365.00

TOTAL ESTIMATED COST (CLINIC AND PHYSICIAN FEES FOR PT) USD 7,365.00

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International Wire Transfer – From Outside of the United States:

Bank of America
901 Main Street
Dallas, TX 75202
ABA No.: 026009593
Account No.: 3751807012
Swift Code: BOFAUS3N
Credit: St. Mary's Medical Center
Ref.: Patient's Name & Date of Service

Domestic Wire Transfer – Within the United States:

Bank of America
901 Main Street
Dallas, TX 75202
ABA No.: 026009593
Account No.: 3751807012
Credit: St. Mary's Medical Center
Ref.: Patient's Name & Date of Service