



901 45th Street
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West Palm Beach, FL 33407
www.stmarysmc.com

PRELIMINARY INVOICE FOR: Dorian Dzieza
SURGERY DATE: October 8, 2024
PAYOR: FUNDACJA MAM SERCE

January 17, 2025
Discount Included: 25%

Hospital Fees Breakdown

Hospital Charges - ICU	1 Night(s)	\$ 6,170.45
Hospital Charges - Room and Board	110 Night(s)	\$ 218,575.50
Hospital Charges - Operating Room	8 Hour(s)	\$ 93,658.50
Hospital Charges - Anesthesia		\$ 18,989.10
Hospital Charges - Recovery Room		\$ 5,384.60
Equipment and Hardware		\$ 4,261.26
Labs, x-rays and medications		\$ 243,474.99
Inpatient Physical Therapy		\$ 26,233.35
TOTAL HOSPITAL FEES		\$ 616,747.75

Physician Fees Breakdown

Application cranial halo	\$ 7,731.00
Paley Prosthetics	\$ 2,953.61
Clinic Visits (2)	\$ 1,658.00
Clinic X-rays:	\$ -
Spine (1)	\$ 647.00
TOTAL TFPS PHYSICIAN FEES	\$ 12,989.61

Hospital Based Physician Fees

Plastic Surgeon	\$ 36,195.08
Anesthesiologist	\$ 7,285.00
Radiologist	\$ 1,002.21
Hospitalist	\$ 46,628.54
Infectious Disease	\$ 43,634.93
TOTAL HOSPITAL BASED PHYSICIAN FEES	\$ 134,745.76

TOTAL PRELIMINARY COST (HOSPITAL AND PHYSICIAN FEES)	USD 764,483.12
LESS: PAYMENT APPLIED - Surgery #1 Estimate	(USD 322,493.59)
LESS: PAYMENT APPLIED - Surgery #2 Estimate	(USD 319,962.40)
LESS: PAYMENT APPLIED - Physical Therapy #1 Estimate	(USD 4,500.00)
TOTAL PAYMENT APPLIED	(USD 646,955.99)
ESTIMATED REMAINING BALANCE DUE	USD 117,527.13

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. A USD \$10,000.00 deposit is due within 48 hours of reserving your surgery date and will be applied towards the total estimated fees. The remaining fees are due one month prior to your scheduled surgery date. Changes or cancellations within 60 days of the surgery date will result in forfeiture of the deposit. 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 Mr. Craig Lawrence at 1-561-882-4711. The expected discharge date is January 27th, 2025.

Best regards,

Mr. Craig Lawrence
Director, Finance
Paley International LLC
Tel: 1-561-882-4711
email: craig.lawrence@tenethealth.com