



May 25, 2026

To whom it may concern

Ref: Safronov Elisey- HR ALL post CAR T -evaluation and treatment basic program

Dear Sir/Madame, thank you for approaching Schneider Children's Medical Center of Israel. Based on the medical data received, Dr. Joanne Yakobovich, the Head of Hemato-Oncology Division, Dr. Asaf Yanir, the Head of BMT Department, Dr. Shlomit Barzilai, the Head of Leukemia Unit, Dr. Gil Gilad and Dr. Ron Rabinovitch, senior hemato-oncologists, recommend the following diagnostic plan- bone marrow biopsy with cytogenetic and molecular tests for diagnosis confirmation and treatment according to the diagnosis established. An individual treatment protocol will be provided in accordance with the precise diagnosis. Our medical team will be glad to treat Elisey soonest possible at Schneider.

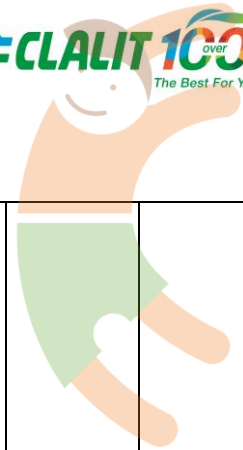
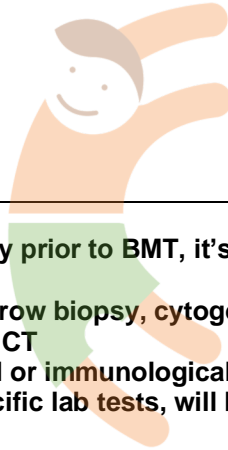
Procedure	Amount	Price for one
Evaluation:		
Consultation by Hemato- Oncologist	1	650 USD
Consultation by any pediatric specialist (if needed)	1	650 USD
Revision of biopsy blocks and slides (from previous disease)	1	760 USD
Basic lab tests for new patient	1	1970 USD
Invasive procedures:		
Bone marrow biopsy	1	3465 USD
Lumbar puncture	1	2880 USD
Molecular and genetic tests-the exact list of cytogenetic and molecular tests will depend on the availability of biological material (unstained slides or blocks) and doctor's recommendations:		
ONCOMINE	1	4520 USD
BIO NANO	1	915 USD
FLOW CYTOMETRY	1	928 USD
SMP ARRAY	1	4462 USD
FISH	1	3569 USD
MRD	1	2450 USD
HLA Typing High resolution (each sample)	1	3200 USD
Treatment protocol may include:		
Central line insertion/exchange (PORT-a-CATH/PICC LINE)	1	5760 USD
Day of chemotherapy in hospitalization	1	2650 USD
Intrathecal Injections	1	2880 USD
Day of hospitalization without chemotherapy (for hydration)	1	1650 USD
Oncology Day care visit without chemotherapy -checkup visit	1	780 USD
Day of hospitalization (if needed for antibiotic treatment or other medical reasons)	1	1650 USD
Hospitalization day for immunotherapy/biological treatment (if needed)	1	1650 USD
*The cost of immunotherapy/biological medicines will be calculated separately		
Day of hospitalization in ICU- <u>if needed</u> (each one from the first 4 days, after the 4 th day the cost is similar to the cost of hospitalization in Pediatric/Oncology department)	1	3500 USD
Evaluations during all the period of treatment:		
PET CT (if needed)	1	2900 USD
ECHO/US	5-6	490 USD
MRI (if needed)	1	2350 USD
CT (if needed)	1	980 USD
ALLOGENEIC BONE MARROW TRANSPLANTAION	1	153600 USD
Donor search, cells collection and delivery (depending on the country of supply and the complexity of the search)	1	15000-60000 USD
*The price of BMT includes induction before transplantation, up to 3 weeks of hospitalization and ambulatory follow-up up to 6 months (medical consultations,		



מרכז שניידר לרפואת ילדים בישראל
 مركز شنايدر لطب الأطفال في اسرائيل

Schneider Children's Medical Center of Israel

Sackler School of Medicine, Tel-Aviv University



<p>blood and urine tests, X-rays and ultrasound) The price of BMT doesn't include radiotherapy prior to BMT, it's cost will be calculated separately <u>if needed</u> *The price of BMT does not include bone marrow biopsy, cytogenetic and molecular investigations, imaging such as CT/ MRI/PET CT *The price of BMT does not include biological or immunological treatment, surgical procedures, genetic and another special specific lab tests, will be calculated according to the doctor's recommendations.</p>		
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All the relevant medical documents and imaging (discs), biopsy material (slides and blocks) with English descriptions are needed for complete reevaluation.
 The provided program cost is not final and can vary according to the evaluations, complications, additional diagnostic and treatment procedures, hospitalization course and currency rate changes.
 The listed price doesn't include any surgical procedures, medicines for immunological/biological treatment, specific lab /genetic tests, (if needed, will be calculated separately), accomodation and transportation services neither for the patient nor for the accompanying person.

Quoted prices are valid for up to 1 month.
 Prepayment for admission in the amount of 70,000 USD to the bank account of the hospital is needed. Prior to BMT procedure its cost should be paid in full.
 In case of any remaining funds post-treatment or unencumbered by any reason deposit, the amount will be refunded to your original bank account. Please be aware that the hospital's accounting system is denominated in shekels, and therefore, all payments received or refunded are proceeded in shekels. The fluctuation in foreign currency rates may cause additional charges.
 Quoted prices are valid for up to 1 month.

Payable to: Schneider Children Medical Center of Israel
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 IBAN: IL68-0120-6300-0000-0220-423



Parents' signature _____ Date _____

